

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0026037
AF

01 MAY -1 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M99000002005

1. Entity Name

SMITH PROPERTY HOLDINGS AVENTURA B L.L.C.

Principal Place of Business

2345 CRYSTAL DRIVE, 10TH FL
ARLINGTON VA 22202

Mailing Address

2345 CRYSTAL DRIVE, 10TH FL
ARLINGTON VA 22202

2. Principal Place of Business

2345 Crystal Drive

3. Mailing Address

2345 Crystal Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Tenth Floor

Tenth Floor

City & State
Arlington, VA

City & State
Arlington, VA

4. FEI Number

54-1713229

Applied For

Not Applicable

Zip
22202

Country
USA

Zip
22202

Country
USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME ☐ Delete
MGRM
STREET ADDRESS SMITH PROPERTY HOLDINGS ONE LP
CITY - ST - ZIP 2345 CRYSTAL DRIVE, 10TH FL
ARLINGTON VA 22202

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 800004104648--5
CITY - ST - ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Delete
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TITLE NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY - ST - ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Robert D. Zimet, VP of Member 04/30/01 (703) 920-8500

Date

Daytime Phone #

CR2E083 (11/00)

2



ACCOUNT NO. : 072100000032

REFERENCE : 133854 131022B

AUTHORIZATION :

Patricia Pigato

COST LIMIT : \$ 50.00

ORDER DATE : April 30, 2001

ORDER TIME : 2:05 PM

ORDER NO. : 133854-025

CUSTOMER NO: 131022B

CUSTOMER: Roxanne Brotherton, Legal Asst
Charles E. Smith Companies
2345 Crystal Drive
10th Floor
Arlington, VA 22202

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2001 MAY -1 PM 3:22

NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

ANNUAL REPORT FILING

NAME: SMITH PROPERTY HOLDINGS
AVENTURA B L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext. 1135

EXAMINER'S INITIALS: _____