

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A19828**

1. Entity Name

GATEWAY PLAZA, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 25 PM 1:33

Principal Place of Business

1201 S. ORLANDO AVE.
WINTER PARK FL 32789

Mailing Address

P.O. BOX 8181
WINTER PARK FL 32790-8181



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1201 S. Orlando Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 370

City & State

City & State
Winter Park, FL

4. FEI Number

59-2527597

Applied For

Not Applicable

Zip

Country

Zip

Country

32789

Orange

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COLADO, GUY D.
1201 S. ORLANDO AVE.
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name

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

1201 S. Orlando Ave.

Suite 370

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

9. Capital Contributions

\$1,548,631.00

10. Amount of Capital Contributions

in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **G92553**
NAME **NBOC, INC.**
STREET ADDRESS **1201 S. ORLANDO AVE.**
CITY - ST - ZIP **WINTER PARK FL 32789**

STREET ADDRESS

1201 S. Orlando Ave., Suite 370

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

500003298295--6

CITY - ST - ZIP

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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Guy D. Colado
SIGNATURE REQUIRED

Guy D. Colado

President, NBOC, Inc. 4/25/00 407-741-8903

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

FILED 1:00:16 PM '00