

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 APR 18 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A20913**

1. Entity Name

THE CLOISTERS OF COUNTRYSIDE, LTD.

Principal Place of Business

3711 CORTEZ ROAD, W., STE. 300
BRADENTON FL 34210

Mailing Address

3711 CORTEZ ROAD, W., STE. 300
BRADENTON FL 34210

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-2599051

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OLSON, ANN M
3711 CORTEZ ROAD, W., STE. 300
BRADENTON FL 34210

7. Name and Address of New Registered Agent

Name

Priscilla G. Heim

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

SUITE 300

3711 CORTEZ RD. WEST

City

BRADENTON, FL 34210

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: Priscilla G Heim

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

April 1, 2001

DATE

9. Capital Contributions
as Shown on record.

\$990.00

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

DOCUMENT # G13157
NAME RIVERWOODS INVEST., INC.
STREET ADDRESS 3711 CORTEZ ROAD WEST
CITY-ST-ZIP BRADENTON FL

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

700005346397--5
-04/25/02--01016--016
****141.25 ****141.25

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:

SIGNATURE REQUIRED
James R. Schier

Date

Daytime Phone #

4/16/02 941 756 0677

CR2E003 (9/01)