

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0015698 AT

DOCUMENT # A20913

1. Entity Name
THE CLOISTERS OF COUNTRYSIDE, LTD.



FILED
03 MAR 19 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

4. FEI Number 59-2599051

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HEIM, PRISCILLA G
3711 CORTEZ ROAD, W., STE. 300
BRADENTON FL 34210

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. I am familiar with, and accept the obligations of registered agent.

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

DATE

9. Capital Contributions as Shown on record. \$990.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # L02000012926
NAME MART PROPERTIES LLC
STREET ADDRESS 3711 CORTEZ ROAD WEST
CITY-ST-ZIP BRADENTON FL 34210

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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CITY-ST-ZIP

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: *Priscilla G. Heim*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

11/13/03 941 328 1034
Date Daytime Phone #

CR2E003 (10/02)