

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A30432**

1. Entity Name
CURTISS AVENUE ASSOCIATES LIMITED PARTNERSHIP



FILED
03 APR 30 AM 11:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
10440 DOWN PATRICK LANE
GREAT FALLS VA 22066

Mailing Address
10440 DOWN PATRICK LANE
GREAT FALLS VA 22066



2. Principal Place of Business
8405 GREENSBORO DR

3. Mailing Address
8405 GREENSBORO DR

Suite, Apt. #, etc.
850

Suite, Apt. #, etc.
850

DUE BY MAY 1, 2003

City & State
MCLEAN VA

City & State
MCLEAN VA

4. FEI Number **65-0207581**

Applied For
☐ Not Applicable

Zip
22102

Country
USA

Zip
22102

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRADLEY, STEVEN
1901 MORRILL ST.
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name
SARMA

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

159 W. WATER ST

City
ROSEMARY BEACH

FL Zip Code
32461

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

9. Capital Contributions
as Shown on record. **\$287,000.00**

10. Amount of Capital Contributions
in FLORIDA to date. **287,000**

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

DOCUMENT # **V03006**
NAME **SARASOTA PROPERTY MANAGEMENT, INC.**
STREET ADDRESS **8405 GREENSBORO DR #850**
CITY-ST-ZIP **MCLEAN VA 22102**

13. ADDRESS CHANGES ONLY

STREET ADDRESS
04/30/03 01088 020 **526.25

CITY-ST-ZIP
900017604139

STREET ADDRESS
04/30/03--01088--020 **526.25

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
STEVEN BRADLEY

Date

Daytime Phone #

CR2E003 (10/02)

0019086 MB