

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0015209 AT

DOCUMENT # A96000001934



1. Entity Name
EAGLE RIDGE LAKES DEVELOPMENT, LTD.

FILED
2003 JAN -9 AM 11:45
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business
**4158 LORRAINE AVE.
NAPLES FL 34104**

Mailing Address
**4158 LORRAINE AVE.
NAPLES FL 34104**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number **65-0723616**

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SIESKY, JAMES H
1000 N. TAMiami TRAIL, SUITE 201
NAPLES FL 34102**

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

9. Capital Contributions as Shown on record. **\$1,134,020.60**

10. Amount of Capital Contributions in FLORIDA to date. **1,134,020.60**

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 #	P95000075954
NAME	F C PROPERTIES, INC.
STREET ADDRESS	4158 LORRAINE AVENUE
CITY-ST-ZIP	NAPLES FL 34104
DOCUMENT #	P95000075948
NAME	OSPREY PROPERTIES, INC.
STREET ADDRESS	1500 OSPREY AVENUE
CITY-ST-ZIP	NAPLES FL 34112
DOCUMENT #	649458
NAME	R.H. OF NAPLES, INC.
STREET ADDRESS	5672 STRAND CT. #1
CITY-ST-ZIP	NAPLES FL 34110
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	

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01709/03--01029--013 **526.25

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]* **SIGNATURE REQUIRED** *[Signature]* **FC Properties, Inc. GP. 1/7/03 239 643 5053**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)