2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001060

1. Entity Name

PGA PROPERTY LIMITED PARTNERSHIP

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS
00 APR 28 AM 3:05

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1120 LASKIN ROAD VIRGINIA BEACH FL 23451	1120 LASKIN ROAD VIRGINIA BEACH FL 23451-5210

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 NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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
MALEFATTO, ALFRED J ESQ. 777 SOUTH FLAGLER DRIVE, SUITE 310 EAST WEST PALM BEACH FL 33410	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.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. $9,900.00	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 # NAME STREET ADDRESS CITY-ST-ZIP	P94000015394 PGA BOULEVARD INVESTMENT CORP. 1120 LASKIN RD. VIRGINIA BEACH VA 23451	STREET ADDRESS CITY-ST-ZIP	Y00003271247- -6 -05/31/00--01014--005 ****158.05 ****158.05
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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: SIGNATURE REQUIRED VP G.P. PGA Blvd. Inv. Corp 1/10/2000 7574223...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #