

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0011834 AT

DOCUMENT # A98000000605

1. Entity Name
FAIRWAYS AT GRAND HARBOR, LTD.



FILED

03 MAR 24 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
801 UNO LAGO DRIVE
JUNO BEACH FL 33408

Mailing Address
C/O FAIRWAYS AT GRAND HARBOR, INC.
801 UNO LAGO DRIVE
JUNO BEACH FL 33408

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, 2003

4. FEI Number 65-0816871

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

GRAZIOTTO, RAYMOND
801 UNO LAGO DRIVE
JUNO BEACH FL 33408

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. \$5,331,681.00

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 # P98000020830
NAME FAIRWAYS AT GRAND HARBOR, INC.
STREET ADDRESS 801 UNO LAGO DRIVE
CITY-ST-ZIP JUNO BEACH FL 33408

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # L01000021867
NAME BANKATLANTIC VENTURE PARTNERS 2, LLC
STREET ADDRESS 1750 E. SUNRISE BLVD., 3RD FLOOR
CITY-ST-ZIP FT. LAUDERDALE FL 33304

STREET ADDRESS

CITY-ST-ZIP

800014550158
03/24/03 01045 056 **528.25

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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: William E. Taylor

3-20-2003

561-625-9488

Date

Daytime Phone #

CR2E003 (10/02)