

2002 UNIFORM BUSINESS REPORT (UBR)

0013616 AT

DOCUMENT # **A99000001516**

1. Entity Name

ARBOR OAKS AT GREENACRES, LTD.

FILED

02 APR 11 PM 12:23

SECRETARY OF STATE



Principal Place of Business

**360 CENTRAL AVENUE
ST PETERSBURG FL 33701**

Mailing Address

**360 CENTRAL AVENUE
ST PETERSBURG FL 33701**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DUE BY MAY 1, 2002

4. FEI Number

59-3597614

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~DELANO, G. KRISTIN~~

**360 CENTRAL AVENUE
ST PETERSBURG FL 33701**

Name **David B. Snyder**

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

360 Central Ave.

City **St. Petersburg**

FL

Zip Code **33701**

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

David B. Snyder
Signature, typed or printed name of registered agent and title if applicable.

David B. Snyder, Esq.

DATE

9. Capital Contributions
as Shown on record.

\$500.00

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 # **P99000074540**
NAME **BKW - GREENACRES INC**
STREET ADDRESS **360 CENTRAL AVENUE**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **P99000074545**
NAME **SYNERGY PROPERTIES-GREENACRES, INC.**
STREET ADDRESS **2087 ILLINOIS AVENUE NE**
CITY-ST-ZIP **ST PETERSBURG FL**

STREET ADDRESS

1109 Abbeys Way

CITY-ST-ZIP

Tampa, FL 33602

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

Synergy Properties-Greenacres, Inc.

SIGNATURE:

By: *David B. Snyder*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03/12/02

Date

Daytime Phone #

CR2E003 (9/01)