

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0019084 MB

DOCUMENT # **B02000000008**

1. Entity Name
NORTHLAKE PARK APARTMENTS, L.P.



FILED

03 APR 17 AM 7:27

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
**5252 LYNATE COURT
BURKE VA 22015**

Mailing Address
**5252 LYNATE COURT
BURKE VA 22015**

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

54-2054528

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENT. FLA., INC.
390 NORTH ORANGE AVE., SUITE 1100
ORLANDO FL 32801**

7. Name and Address of New Registered Agent

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, and accepts the obligations of registered agent. **04/17/03--01060--005 **463.11**

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

DATE

9. Capital Contributions
as Shown on record. **\$25,000.00**

10. Amount of Capital Contributions
in FLORIDA to date. **\$53,480.00**

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 # **F02000000183**
NAME **NORTHLAKE PARK, INC.**
STREET ADDRESS **5252 LYNATE COURT**
CITY-ST-ZIP **BURKE VA 22015**

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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

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
NorthLake Park Apartments, L.P.

SIGNATURE: _____

SKENET RAY **REKENETH A. Ryan**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Exec. VP/S/T **4/8/03**

(703) 425-2600

Date

Daytime Phone #

CR2E003 (10/02)