

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

01 MAY -2 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # A97000001414

1. Entity Name

ATLANTIC CENTER, LTD.

Principal Place of Business

1801 S. FEDERAL HIGHWAY, SUITE 202
DELRAY BEACH FL 33483

Mailing Address

1801 S. FEDERAL HIGHWAY, SUITE 202
DELRAY BEACH FL 33483

2. Principal Place of Business

400 E. Linton Blvd

Suite, Apt. #, etc.

G-3

City & State

Delray Beach, FL

Zip

33483

Country

3. Mailing Address

400 E. Linton Blvd

Suite, Apt. #, etc.

G-3

City & State

Delray Beach, FL

Zip

33483

Country

4. FEI Number

65-0762623

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WERBER, RICHARD

6111 BROKEN SOUND PARKWAY, N.W.

BOCA RATON FL 33387

7. Name and Address of New Registered Agent

Name

Charles Posternack

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

400 East Linton Boulevard

Suite G-3

City

Delray Beach

FL

Zip Code

33483

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

Charles Posternack
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.

\$2,079,000.00

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

DOCUMENT # P97000054924
NAME ATLANTIC CENTER, INC.
STREET ADDRESS 851 BROKEN SOUND PARKWAY, N.W.
CITY-ST-ZIP BOCA RATON FL 33487

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

400 E. Linton Blvd #G-3

CITY-ST-ZIP

Delray Beach, FL 33483

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE:

Charles Posternack
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/13/2001

Date

561.278.1169

Daytime Phone #

CFR2003 (11/00)