

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0018076 AT

DOCUMENT # A97000000350

1. Entity Name
SILVER SPRINGS SHORES LAND TRUST, LTD.



FILED

03 JUN -9 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
101 N.E. FIRST AVENUE
OCALA FL 34470

Mailing Address
101 N.E. FIRST AVENUE
OCALA FL 34470

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number 59-3424591

Applied For
Not Applicable

Zip

Country

Zip

Country

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

MCKEEVER, JOHN P
2100 S.E. 17TH STREET, SUITE 300
OCALA FL 34471

Name JOHN S. RUDNIAWYAN
Street Address (P.O. Box Number is Not Acceptable) 101 NE FIRST AVENUE
City Ocala FL 34470

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.

4/22/03
DATE

9. Capital Contributions as Shown on record. \$1,450,000.00

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 # P97000012531
NAME SPRINGS SHORES INVESTMENTS, INC.
STREET ADDRESS 101 N.E. FIRST AVENUE
CITY-ST-ZIP Ocala FL 34470

STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER John S. Rudniansky 4/22/03 352-629-6101
Date Daytime Phone #

CR2E003 (10/02)