

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000191

1. Entity Name

RIO HILLS PROPERTIES, LTD.

FILED

2002 OCT -8 PM 1:38

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7523 Seurat Street

3. Mailing Address
7626 Sand Lake Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1

#2107

City & State

City & State

4. FEI Number

Applied For

Orlando, Florida

Orlando, Florida

59-3627003

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

32819

USA

32819

USA

7. Name and Address of Current Registered Agent

Name

G&L-Agent-Services, Inc.

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

390 N. Orange Ave.

Suite 600

City

Orlando,

FL

Zip Code
32801

**DO NOT WRITE
IN THIS SPACE**

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

Robert E. ...

DATE

9. Capital Contributions
as Shown on record.

\$180,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$180,000.00

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 # P97000061203
NAME SUA-CASA NA Florida Corporation
STREET ADDRESS 7626 Sand Lake Road
CITY-ST-ZIP Orlando, FL 32819

STREET ADDRESS

CITY-ST-ZIP

3000008326153-4

-10/11/02-01016-003

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

GENERAL PARTNER

9/20/02

407. 467 9446

STAPLE CHECK HERE

CR2E003B (12/01)