

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000435

1. Entity Name

WATERWAY APARTMENTS, LTD.

Principal Place of Business

2407 NW 135TH ST., SUITE 101
MIAMI FL 33167

Mailing Address

2407 NW 135TH ST., SUITE 101
MIAMI FL 33167

FILED

JUL 17 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

2621 N.W. 135 Street

3. Mailing Address

Suite, Apt. #, etc.

DUE BY SEPTEMBER 26, 2001

City & State

Miami, Florida

City & State

4. FEI Number

65-0331079

Applied For

Not Applicable

Zip 33167

Country U.S.A.

Zip

Country

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ANTHONY, GEORGE D.
75437 OVERSEAS HIGHWAY
ISLAMORADA FL 33036

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, or both, in the State of Florida.

SIGNATURE

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.

\$15,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$15,000.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATIONA 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 #
NAME ANTHONY, GEORGE D
STREET ADDRESS 75437 OVER SEAS HIGHWAY
CITY-ST-ZIP ISLAMORADA FL 33036DOCUMENT #
NAME
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STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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-07/20/01--01066--006
*****593.75 *****593.75

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

X *George D. Anthony*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

7/10/01

Daytime Phone #

(305) 769-0146