

2001 UNIFORM BUSINESS REPORT (UBR)

0001690 AF

DOCUMENT # A00000000477

1. Entity Name

AFFORDABLE RESIDENTIAL, LTD.

Principal Place of Business

425 WEST NEW ENGLAND AVE., SUITE 300
WINTER PARK FL 32789

Mailing Address

P.O. BOX 350
WINTER PARK FL 32790-0350

FILED

01 MAR -5 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

558 W. New England Ave. and me

3. Mailing Address

Suite, Apt. #, etc.

Suite 210

City & State

Winter Park, FL

City & State

Zip

Country

32789

U.S.

4. FEI Number

59-3635247

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BELLOWS, DANIEL B

425 WEST NEW ENGLAND AVE., SUITE 300
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name
Daniel B. Bellows

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

558 W. New England Ave

Suite 210

City

Winter Park

FL

Zip Code

32789

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] Daniel B. Bellows

2/21/01

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.

\$990.00

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 # P94000038528
NAME WINTER PARK REDEVELOPMENT MGMT. CORP.
STREET ADDRESS 425 WEST NEW ENGLAND AVE., SUITE 300
CITY-ST-ZIP WINTER PARK FL 32789

13. ADDRESS CHANGES ONLY

STREET ADDRESS Post office Box 350
CITY-ST-ZIP Winter Park, FL 32790-0350

DOCUMENT #
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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] Daniel B. Bellows Pres 2/21/01 407-644-351

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)