

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVE.
AND
FILED

0008679
AT

DOCUMENT # A00000001107

1. Entity Name

LYONS CORPORATE PARK, LLLP

02 APR 19 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
4100 NORTH POWERLINE ROAD, SUITE B-2 4100 NORTH POWERLINE ROAD, SUITE B-2
POMPANO BEACH FL 33073 POMPANO BEACH FL 33073



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DUE BY MAY 1, 2002

4. FEI Number 65-0403329 Applied For Not Applicable

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

LASSER, LEE S
4100 NORTH POWERLINE ROAD, SUITE B-2
POMPANO BEACH FL 33073

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.

DATE

9. Capital Contributions as Shown on record. \$2,010,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	LASSER, LEE S TRUSTEE 4100 NORTH POWERLINE ROAD, SUITE B-2 POMPANO BEACH FL 33073	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	829927 FERRERA, MICHELE TRUSTEE 6601 LYONS ROAD, C-1 COCONUT CREEK FL 33073	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	829927 FERRERA, MICHAEL J TRUSTEE 6601 LYONS ROAD, C-1 COCONUT CREEK FL 33073	STREET ADDRESS CITY-ST-ZIP	000005418330--6 -05/01/02--01079--001 ****526.25 ****526.25
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	829927 FERRERA, AUGUSTINE TRUSTEE 6601 LYONS ROAD, C-1 COCONUT CREEK FL 33073	STREET ADDRESS CITY-ST-ZIP	
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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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/16/02

Date Daytime Phone #

CR2E003 (9/01)