

2002 UNIFORM BUSINESS REPORT (UBR)

0017016 AT

DOCUMENT # **A00000001325**

1. Entity Name

CLEARVIEW TELEPLACE TAMPA, LTD.

FILED

02 APR 29 AM 9:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA

04-09

Principal Place of Business

**6700 CITICORP DRIVE
TAMPA FL 33619**

Mailing Address

**2000 E. LAMAR BLVD., SUITE 150
ARLINGTON TX 76006**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

2311 Cedar Springs RD.

Suite, Apt. #, etc.

Suite 100

City & State

Dallas, Texas

Zip

75201

Country

4. FEI Number

75-2899802

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DUE BY MAY 1, 2002



6. Name and Address of Current Registered Agent

KALISH & WARD, P.A.

**101 E. KENNEDY BLVD., SUITE 4100
TAMPA FL 33602-5152**

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.

DATE

9. Capital Contributions
as Shown on record.

\$4,100.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$5,248,783.00

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 # **M00000001713**
NAME **CLEARVIEW TELEPLACE TAMPA, L.L.C.**
STREET ADDRESS **2000 E. LAMAR BLVD., SUITE 150**
CITY-ST-ZIP **ARLINGTON TX 76006**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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FF \$526.25

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

By: Clearview Teleplace Tampa LLC, GP

By: D. Craig Walker, President

4/24/02

(214) 855-0550

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)