

2002 UNIFORM BUSINESS REPORT (UBR)

0008463 AT

DOCUMENT # A00000001552

1. Entity Name

WATERFORD PARK AT WATERFORD LAKES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY -2 PM 2:01

WL 5/20

Principal Place of Business

1803 PARK CENTER DR., #220
ORLANDO FL 32835

Mailing Address

1803 PARK CENTER DR., #220
ORLANDO FL 32835



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

59-367563

APPLIED FOR

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TOWNSEND, DAVID J

1803 PARK CENTER DR., #220
ORLANDO FL 32835

Name

Randolph J. Rush

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

250 Park Avenue South, 5th Floor

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, typed or printed name of registered agent and title if applicable.

4/29/02

DATE

9. Capital Contributions
as Shown on record.

\$500.00

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 # F00000005722
NAME WATERFORD PARK DEVELOPMENT CORP.
STREET ADDRESS 1803 PARK CENTER DR., #220
CITY-ST-ZIP ORLANDO FL 32835

STREET ADDRESS

CITY-ST-ZIP

400005491254--4

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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7095.75 *141.25

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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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

David J. Townsend, President

4/29/02

407 294 6400

Date

Daytime Phone #

CR2E003 (9/01)