

2002 UNIFORM BUSINESS REPORT (UBR)

0003361 SP

DOCUMENT # A00000002001

1. Entity Name

WINTER HAVEN-ARBOURS LIMITED PARTNERSHIP

Principal Place of Business

660 LASALLE PLACE, UNIT 2 C
HIGHLAND PARK IL 60035

Mailing Address

660 LASALLE PLACE, UNIT 2 C
HIGHLAND PARK IL 60035

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-4397574

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

MARGOLIES, MARVIN H
6720 PALERMO WAY
LAKE WORTH FL 33467

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions

\$669,060.00

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 # P00000099371
NAME DASE, INC.
STREET ADDRESS 660 LASALLE PLACE, UNIT 2 C
CITY-ST-ZIP HIGHLAND PARK IL 60035

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

CR2E003 (4/02)

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: By *DASE, INC.* PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

8/16/02

Date

847-926-4422

Daytime Phone #