

2002 UNIFORM BUSINESS REPORT (UBR)

0016378 AT

DOCUMENT # **A01000001390**

1. Entity Name

FLOWERWOOD I LIMITED PARTNERSHIP-

Principal Place of Business

Mailing Address

**13340 WEST COLONIAL DRIVE, SUITE 220
WINTER GARDEN FL 34787**

**13340 WEST COLONIAL DRIVE, SUITE 220
WINTER GARDEN FL 34787**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

60 000 2088
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LF

**SECRETARY OF STATE
FLORIDA**



DUE BY MAY 1, 2002

4. FEI Number

60 000 2088

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

REINHARDT, ERIC C

13340 WEST COLONIAL DRIVE, SUITE 220

WINTER GARDEN FL 34787

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

DATE

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

9. Capital Contributions
as Shown on record.

\$80,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$8,000.00

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	REINHARDT, ERIC C 13340 WEST COLONIAL DRIVE, SUITE 220 WINTER GARDEN FL 34787	STREET ADDRESS	
NAME		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:

Eric C Reinhardt
SIGNATURE REQUIRED General Partner

3/7/2002 251-964-5122

Date

Daytime Phone #

CR2E003 (9/01)