

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0005690
AT

DOCUMENT # A02000001023

1. Entity Name
CAMERON-ASH PROPERTIES, LTD PARTNERSHIP



FILED
03 FEB -3 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
275 W. MAIN STREET
LAKE BUTLER FL 32054

Mailing Address
PO BOX 567
LAKE BUTLER FL 32054



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, 2003

4. FEI Number 14-1843436

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

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FL
MIAMI FL 33145

Name CHRISTOPHER FORTNER

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

275 W. MAIN STREET

City LAKE BUTLER

FL

Zip Code 32054

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

DATE

1-30-03

9. Capital Contributions \$500.00
as Shown on record.

10. Amount of Capital Contributions 500.00
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 FORTNER, CHRISTOPHER R
STREET ADDRESS PO BOX 567
CITY-ST-ZIP LAKE BUTLER FL 32054

STREET ADDRESS

CITY-ST-ZIP

400011625814
02/03/03--01103--021 **141.25

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STREET ADDRESS

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 REQUIRED CHRISTOPHER R. FORTNER 1-30-03 386-496-3034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE