

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0002986 AV

DOCUMENT # A02000001215

1. Entity Name
FAIRWAYS 100, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 15 PM 5:21

Principal Place of Business
319 CLEMATIS STREET, SUITE 702
WEST PALM BEACH FL 33401

Mailing Address
319 CLEMATIS STREET, SUITE 702
WEST PALM BEACH FL 33401



2. Principal Place of Business
3540 Forest Hill Blvd

3. Mailing Address
3540 Forest Hill Blvd

Suite, Apt. #, etc.

203

Suite, Apt. #, etc.

203

DUE BY MAY 1, 2003

City & State

West Palm Beach FL

City & State

West Palm Beach FL

4. FEI Number

83-0338102

Applied For

Not Applicable

Zip

33406

Country

USA

Zip

33406

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIORDANO, JOHN N
220 SOUTH FRANKLIN STREET
TAMPA FL 33602

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. 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
as Shown on record.

\$10,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

10,000 -

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

DOCUMENT # P02000046195
NAME FAIRWAYS 100, INC.
STREET ADDRESS 319 CLEMATIS STREET, SUITE 702
CITY-ST-ZIP WEST PALM BEACH FL 33401

13. ADDRESS CHANGES ONLY

STREET ADDRESS

3540 Forest Hill Blvd #203

CITY-ST-ZIP

West Palm Beach, FL 33406

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

200019085892

05/15/03--01060--004 **158.75

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

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: *Dedrick A. Dentry* Pres 4/5/03 5214334810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Fairways 100, Inc.

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE