

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02349

1. Entity Name

THE VERO BEACH DEVELOPMENT ASSOCIATION, LTD.

Principal Place of Business

5865 - 34TH STREET
VERO BEACH FL 32960

Mailing Address

5865 - 34TH STREET
VERO BEACH FL 32960

FILED

01 FEB -8 AM 10:11

SECRETARY OF STATE
TALLAHASSEE,



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1477982

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HATALA, LEONARD
5865-34 STREET
VERO BEACH FL 32960

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$160,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

READY

NOT AVAILABLE

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP

HATALA, LEONARD
5865 - 34TH STREET
VERO BEACH FL

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

BARON, RUDOLF
428 ELK AVE.
CRESTED BUTTE CO

STREET ADDRESS

CITY-ST-ZIP

P.O. Box 622
FLORENCE, CO. 81226-0622

DOCUMENT #
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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: LEONARD HATALA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

0013291 AF

CR2E003 (11/00)