

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A02685**

1. Entity Name

MAGNOLIA GROVES OF TAVARES, LTD.

Principal Place of Business

**2215 GEIGEL CT.
ORLANDO FL 32806**

Mailing Address

**2215 GEIGEL CT.
ORLANDO FL 32806**

2. Principal Place of Business

**11415 SWIFT WATER CIR
Suite, Apt. #, etc.**

3. Mailing Address

**11415 SWIFT WATER CIR
Suite, Apt. #, etc.**

City & State
ORLANDO FL

City & State
ORLANDO FL

4. FEI Number

59-1511845

Applied For

Not Applicable

Zip
32817

Country

Zip
32817

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CRAWFORD, JAMES I.
2215 GEIGEL CT.
ORLANDO FL 32806**

7. Name and Address of New Registered Agent

Name
CARL M. NAPOLITANO

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

11415 SWIFT WATER CIR

City
ORLANDO

FL

Zip Code
32817

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

Carl M. Napolitano

(NOTE: Registered Agent signature required when reinstating)

1/21/01

DATE

9. Capital Contributions
as Shown on record.

\$176,800.00

10. Amount of Capital Contributions
in FLORIDA to date.

176,800.00

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**CRAWFORD, JAMES I.
2215 GEIGEL CT.
ORLANDO FL 32806**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**NAPOLITANO, CARL M.
11415 SWIFT WATER CIRCLE
ORLANDO FL 32817**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**KRAUSS, WM. E.
515 HANOVER CT
GOODLETTSVILLE TN 37072-2153**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

700003707787-5
02/16/01 01115 006
******526.25 ****526.25**

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:

Carl M. Napolitano
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/21/01

Date

(407) 275-9512

Daytime Phone #

0002371 AF

CR2E003 (11/00)

FILED

01 FEB 14 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE