

2001 UNIFORM BUSINESS REPORT (UBR)

1 of 2

DOCUMENT # **A05008**

1. Entity Name

MAPLE 108 ASSOCIATES, LIMITED PARTNERSHIP

Principal Place of Business

**13710 FNB PARKWAY
#100
OMAHA NE 68124**

Mailing Address

**13710 FNB PARKWAY
#100
OMAHA NE 68124**

FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



2. Principal Place of Business

3. Mailing Address

PO Box 542010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
Omaha, NE 68154-8010**

DUE BY SEPTEMBER 26, 2001

4. FEI Number **43-1098882**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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.

\$440,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # **G92345900080**
NAME **N & K INVESTMENT CO.**
STREET ADDRESS **13710 FNB PARKWAY, #100**
CITY-ST-ZIP **OMAHA NE 68154**

STREET ADDRESS **PO Box 542010**
CITY-ST-ZIP **Omaha, NE 68154-8010**

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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

MAPLE 108 ASSOCIATES, LIMITED PARTNERSHIP

SIGNATURE:

BY: **SIGNATURE REQUIRED**

7/16/01

402-496-1616

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Harlan J. Noddie, Partner of N&K Investment Co., Gen. Partner

Daytime Phone #

CR2E003 (5/01)