

2001 UNIFORM BUSINESS REPORT (UBR)

0016312 AF

DOCUMENT # A06747

1. Entity Name

NORTHWOOD APARTMENTS, LTD.

Principal Place of Business
6954 AMERICANA PARKWAY
REYNOLDSBURG OH 43068

Mailing Address
6954 AMERICANA PARKWAY
REYNOLDSBURG OH 43068

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1923122

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

LEXIS DOCUMENT SERVICES
3953 WW KELLY ROAD
TALLAHASSEE FL 32311

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. \$121,500.00

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 # F63477
NAME CARDINAL INDUSTRIES OF FLORIDA SERV. CORP.
STREET ADDRESS 6954 AMERICANA PARKWAY
CITY-ST-ZIP RENOLDSBURG OH

STREET ADDRESS

CITY-ST-ZIP

3000004421483--8
-06/14/01--01131--015
****526.25 ****526.25

DOCUMENT # F95000004940
NAME GRI-OPV 20128, INC.
STREET ADDRESS 6954 AMERICANA PARKWAY
CITY-ST-ZIP RENOLDSBURG OH

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # M99000001686
NAME LEXFORD GP II, LLC
STREET ADDRESS TWO N. RIVERSIDE PLZ, #400
CITY-ST-ZIP CHICAGO, IL 60606

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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:

Samira A. Peltz
TAMENOMENT
FILED
4/19/01

4/10/01

Date

Daytime Phone #

CR2E003 (11/00)

FILED
2001 MAY 11 PM 1:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE