

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A11159**

1. Entity Name

**ORANGE CITY VILLAS II, LTD.**

Principal Place of Business

1873 SOUTH BELLAIRE STREET, SUITE 1700  
DENVER CO 80222-4348

Mailing Address

1873 SOUTH BELLAIRE STREET, SUITE 1700  
DENVER CO 80222-4348

**FILED**

**00 SEP 29 PM 2:47**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**2000 S. Colorado Blvd.**

3. Mailing Address

**2000 S. Colorado Blvd.**

Suite, Apt. #, etc.

**Tower Two, Suite 2-1000**

Suite, Apt. #, etc.

**Tower Two, Suite 2-1000**

City & State

**Denver, CO**

City & State

**Denver, CO**

4. FEI Number

**52-1279105**

Applied For

Not Applicable

Zip

**80222**

Country

**USA**

Zip

**80222**

Country

**USA**

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

**UNITED STATES CORPORATION COMPANY  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE FL 32301**

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.

**\$10.00**

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 # **K45010**  
NAME **CONDEV CORPORATION**  
STREET ADDRESS **1215 LOUISIANA AVE**  
CITY-ST-ZIP **WINTER PARK FL**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **A06999**  
NAME **NAT'L HOUSING PARTNERSHP**  
STREET ADDRESS **1225 EYE STREET, NW., SUITE 200**  
CITY-ST-ZIP **WASHINGTON DC 20005**

STREET ADDRESS

CITY-ST-ZIP

**2000 South Colorado Boulevard  
Tower Two, Suite 2-1000  
Denver, CO 80222**

DOCUMENT #  
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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

**Orange City Villas II, Ltd, by its Managing GP, The National Housing Partnership, by its GP,  
National Corporation for Housing Partnerships**

**SIGNATURE: By: *Leslie E. Green* Leslie E. Green, Asst. Secretary 8-22-00 (303) 757-**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**8101**

CR2E003 (5/00)



THE UNITED STATES  
CORPORATION  
C O M P A N Y

# A11159

(2)

ACCOUNT NO. : 072100000032

REFERENCE : 847275 5124005

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : ~~\$ 526.25~~

ORDER DATE : September 28, 2000

*541.25*

ORDER TIME : 12:19 PM

ORDER NO. : 847275-035

CUSTOMER NO: 5124005

CUSTOMER: Leslie Green, Corp Paralegal  
Aimco  
2000 South Colorado Blvd.  
Tower Two, Suite 2-1000  
Denver, CO 80222

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00 SEP 29 PM 2:47  
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TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: ORANGE CITY VILLAS II, LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

*Mr 9/29*

CONTACT PERSON: Sandy Mathis ext 1165

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
00 SEP 29 PM 1:18  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA