

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A12848**

1. Entity Name

WOODWINDS ASSOCIATES, LTD., LIMITED PARTNERSHIP

FILED

02 MAR 21 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

C/O WINGATE DEVELOPMENT CORP.
63 KENDRICK STREET, ONE CHARLES RIVER PLC
NEEDHAM MA 02494

C/O WINGATE DEVELOPMENT CORP.
63 KENDRICK STREET, ONE CHARLES RIVER PLC
NEEDHAM MA 02494

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

04-2771156

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

WINGATE MANAGEMENT COMPANY, INC.
C/O WOODWINDS APARTMENTS
1800 WOODWINDS DRIVE
BRADENTON FL 34208

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

DATE

9. Capital Contributions
as Shown on record.

\$874,175.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$0.0

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 # **856051**
NAME **CONTINENTAL WINGATE CO. OF GEORGIA, INC.**
STREET ADDRESS **3833 PEACHTREE ROAD, N.E.**
CITY-ST-ZIP **ATLANTA GA 30319**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **856052**
NAME **WINGATE DEVELOPMENT CORP**
STREET ADDRESS **63 KENDRICK STREET, ONE CHARLES RIVER PLC**
CITY-ST-ZIP **NEEDHAM, MA 02494**

STREET ADDRESS

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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: *Anne T. Asdot* Anne T. Asdot, Assistant Clerk
Wingate Development Corp., 03/18/02 781-707-9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0017651 AT

CR2E003 (9/01)

STAPLE CHECK HERE