

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0014813 AT

DOCUMENT # A13771

1. Entity Name
POLO PARK, LTD.



FILED

FILED

03 APR 17 AM 7:29

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business
12222 US HWY 27 N
DAVENPORT FL 33837

Mailing Address
12222 US HWY 27 N
DAVENPORT FL 33837

2. Principal Place of Business

110 Lake Davenport Blvd.
Suite, Apt. #, etc.

3. Mailing Address

110 Lake Davenport Blvd.
Suite, Apt. #, etc.



DUE BY MAY 1, 2003

City & State
Davenport FL

City & State
Davenport FL

4. FEI Number 59-2233605

Applied For
Not Applicable

Zip
33897

Country
USA

Zip
33897

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BORNSTEIN, DAVID
12222 US HWY 27 N
DAVENPORT FL 33837

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

300016221679
04/17/03--01078--011 *\$141.25

DATE

9. Capital Contributions as Shown on record. \$10,800.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # G32849
NAME POLO PARK DEVELOPERS, INC
STREET ADDRESS 12222 US HWY 27 N
CITY-ST-ZIP DAVENPORT FL 33837

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 12, 2003 863 4242903
Date Daytime Phone #

CR2E003 (10/02)