

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A15687**

1. Entity Name

CFS REAL ESTATE INVESTORS, LTD.

FILED

01 APR 16 PM 12:40

Principal Place of Business
**405 DOUGLAS AVE., STE. 2605
ALTAMONTE SPRINGS FL 32714**

Mailing Address
**405 DOUGLAS AVE., STE. 2605
ALTAMONTE SPRINGS FL 32714**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

210 CROWN POINT CIRCLE

3. Mailing Address

210 CROWN POINT CIRCLE

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

SUITE 200

City & State

LONGWOOD, FL

City & State

LONGWOOD, FL

Zip

32779

Country

USA

Zip

32779

Country

USA

4. FEI Number

59-2332823

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAYES, DELTON L
405 DOUGLAS AVE.
SUITE 2605
ALTAMONTE SPRINGS FL 32714**

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.

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.

\$3,139,500.00

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**NOGA, GEORGE K.
405 DOUGLAS AVE., STE. 2605
ALTAMONTE SPRINGS FL 32714**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**HAYNES, DELTON L.
405 DOUGLAS AVE., STE. 2605
ALTAMONTE SPRINGS FL 32714**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**BERT, JOSEPH F.
405 DOUGLAS AVE., STE. 2605
ALTAMONTE SPRINGS FL 32714**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

500004065065--2

-04/24/01--01104--017

*******526.25 *****526.25**

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

Delton L. Haynes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/10/01

Date

(407) 862-1303

Daytime Phone #

DELTON L. HAYNES

CR2E003 (11/00)