

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A16159

1. Entity Name
TAMPA I-75, LTD.



FILED

03 APR 22 PM 3:23

Principal Place of Business
5445 MARINER ST #110
TAMPA, FL 33609-3415

Mailing Address
5445 MARINER ST #110
TAMPA FL 33609-3415



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 59-2346305

Applied For
Not Applicable

Zip

Country

Zip

Country

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

IRVING, PETER
5445 MARINER ST #110
TAMPA FL 33609-3415

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.

DATE

9. Capital Contributions as Shown on record. \$2,585,700.00

10. Amount of Capital Contributions in FLORIDA to date. 1,290,945.61

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 #
NAME BAXTER, GEORGE J.
STREET ADDRESS 4963 BACOPY LANE SO. APT 803
CITY-ST-ZIP ST. PETERSBURG FL 33715

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME IRVING, PETER
STREET ADDRESS 14900 GULF BLVD. #402
CITY-ST-ZIP MADEIRA BCH FL

STREET ADDRESS
CITY-ST-ZIP

400016650984
04/22/03-01988-011 **526.25

DOCUMENT #
NAME KERR, ROBERT S. JR.
STREET ADDRESS 12501 N MARY AVE.
CITY-ST-ZIP OKLAHOMA CITY OK

STREET ADDRESS
CITY-ST-ZIP

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NAME
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: *Peter Irving, Gen. Ptn.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-16-03 813-282-1873
Date Daytime Phone #

0013388 AT

CR2E003 (10/02)

STATE USE ONLY HERE