2001 UNIFORM BUSINESS REPORT (UBR)

000280 AF

DOCUMENT # A17446

1. Entity Name

THE ARBORS, LTD.

FILED
01 APR 26 PM 3:53
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
200 E. ROBINSON STREET SUITE 865 ORLANDO FL 32801	200 E. ROBINSON STREET SUITE 865 ORLANDO FL 32801

2. Principal Place of Business	3. Mailing Address
11 Maitland Grove Rd	11 Maitland Grove Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Maitland, Fla	City & State: Maitland, Fla
Zip: 32751 Country: USA	Zip: 32751 Country: USA

4. FEI Number 59-2372358 — 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
MARKS, ROBERT O. 200 E. ROBINSON ST. SUITE 865 ORLANDO FL 32801	Name: Louis E Feinberg Street Address (P.O. Box Number is Not Acceptable): 11 Maitland Grove Rd City: Maitland FL Zip Code: 32751

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 Louis E Feinberg 3/25/01

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. $11,000.00	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 # NAME STREET ADDRESS CITY-ST-ZIP	FEINBERG, LOUIS 200 E NEW ENGLAND AV 4TH WINTER PARK FL 32789	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MARKS, ROBERT O. P.O. BOX 2254 ORLANDO FL 32802	STREET ADDRESS CITY-ST-ZIP	500004211975--5 -05/11/01--01030--003 ****165.75 ****165.75
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CR2E003 (11/00)

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 REQUIRED Louis E Feinberg 3/25/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone # 407 740 4505