

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0019705 MB

DOCUMENT # A17607

1. Entity Name  
NTS/FORT LAUDERDALE, LTD.



FILED

03 APR 29 PM 12:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RJH

Principal Place of Business  
C/O NTS CORPORATION  
10172 LINN STATION RD.  
LOUISVILLE KY 40223

Mailing Address  
C/O NTS CORPORATION  
10172 LINN STATION RD.  
LOUISVILLE KY 40223



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 61-1057343

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

ADAMS, GARY D  
5350 SHORELINE CIRCLE  
LAKE FOREST FL 32771

Name Richard D. Bavec  
Street Address (P.O. Box Number is Not Acceptable)  
6350 Shoreline Circle  
City Lake Forest FL Zip Code 32771

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

Richard D. Bavec

4/5/03

DATE

9. Capital Contributions  
as Shown on record. \$1,335,636.00

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 #  
NAME NICHOLS, J.D.  
STREET ADDRESS 10172 LINN STATION ROAD  
CITY-ST-ZIP LOUISVILLE KY 40223

STREET ADDRESS  
CITY-ST-ZIP  
50001 7232415  
04/29/03--01017--028 \*\*526.25

DOCUMENT #  
NAME ADAMS, GARY D.  
STREET ADDRESS 5350 SHORELINE CIR.  
CITY-ST-ZIP SANFORD FL 32771

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME P05990  
STREET ADDRESS NTS CAPITAL CORPORATION  
CITY-ST-ZIP 10172 LINN STATION RD.  
LOUISVILLE KY 40223

STREET ADDRESS  
CITY-ST-ZIP

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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

NTS Capital Corporation, General Partner

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/8/03

(502) 426-4800

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE