

2001 UNIFORM BUSINESS REPORT (UBR)

0013215 AF

DOCUMENT # A18124

1. Entity Name

VISTA LIMITED

Principal Place of Business

P.O. BOX 620365
ORLANDO FL 32862

Mailing Address

P.O. BOX 620365
ORLANDO FL 32862

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2469626

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

FILED

01 MAR 15 PM 12:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEE, RICHARD T
7050 AUGUSTA NATIONAL DR.
ORLANDO FL 32822

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.

\$985.00

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 # H20996
NAME LEE PROPERTIES, INC.
STREET ADDRESS 7050 AUGUSTA NAT'L DRIVE
CITY-ST-ZIP ORLANDO FL

STREET ADDRESS
CITY-ST-ZIP
400003889104-6
-03/20/01--01109--010
*****52.50 *****52.50

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP
400003889104-6
-03/20/01--01109--011
*****88.75 *****88.75

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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

LEE PROPERTIES, INC. - GENERAL PARTNER

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

RICHARD T. LEE

1-09-2001

Date

407-857-2835

Daytime Phone #

CR2E003 (11/00)