

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Feb 01, 2001 08:00 AM**  
**Secretary of State**

**DOCUMENT # A20644**

1. Entity Name  
**FORT MYERS, LTD.**

Principal Place of Business 1100 SPRING STREET, N.W. SUITE 550 ATLANTA GA 303092848	Mailing Address 1100 SPRING STREET, N.W. SUITE 550 ATLANTA GA 303092848
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number  
**58-1632995**

Applied For	Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**DRAGE THOMAS BESQ.**  
**DRAGE DEBEAUBIEN KNIGHT SIMMONS ROMANO & N**  
**332 NORTH MAGNOLIA AVENUE**  
**ORLANDO FL 32802 US**

**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 **THOMAS B. DRAGE, ESQ.**

**02/01/2001**

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. **2,840,545.71**

10. Amount of Capital Contributions in FLORIDA to date. **2,840,545.71**

**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	<b>SELIG ENTERPRISES, INC.</b>
STREET ADDRESS	<b>1100 SPRING ST, NW #550</b>
CITY-ST-ZIP	<b>ATLANTA GA</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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	<b>1100 SPRING ST, NW #550</b>
CITY-ST-ZIP	<b>ATLANTA GA 30309</b>
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:** William J. Dankins, Esq.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**SVP** **02/01/2001**

Date Daytime Phone #

CR2E003 (11/00)