

# 2000 UNIFORM BUSINESS REPORT (UBR)

0002594 AF

DOCUMENT # **A21414**

1. Entity Name  
**SAN CARLOS PLAZA, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 SEP -1 AM 10:02

Principal Place of Business  
**1250 TAMiami TRAIL N., #301  
NAPLES FL 34102**

Mailing Address  
**1250 TAMiami TRAIL N., #301  
NAPLES FL 34102**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**9220 BONITA BEACH ROAD**

3. Mailing Address  
**9220 BONITA BEACH ROAD**

Suite, Apt. #, etc.  
**SUITE 200**

Suite, Apt. #, etc.  
**SUITE 200**

City & State  
**BONITA SPRINGS, FL**

City & State  
**BONITA SPRINGS, FL**

Zip  
**34135**

Country  
**USA**

Zip  
**34135**

Country  
**USA**

4. FEI Number  
**59-2692664**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ERICKSON, PHILIP A  
1250 TAMiami TRAIL N., #301  
NAPLES FL 34102**

7. Name and Address of New Registered Agent

Name  
**LARRY WYNN**

Street Address (P.O. Box Number is Not Acceptable)  
**9220 BONITA BEACH ROAD, SUITE 200**

**BONITA**

City  
**BONITA SPRINGS**

FL

Zip Code  
**34135**

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]* **august 22, 2000**  
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. **\$262,500.00**

10. Amount of Capital Contributions in FLORIDA to date. **SAME**

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	STREET ADDRESS	
	LOCKER, JOSEPH R., JR.	350 FIFTH AVENUE SOUTH, #200		
		NAPLES FL 34102	CITY-ST-ZIP	<b>600003384345-1</b>
				<b>-09/06/00--01107--007</b>
				<b>****326.25 ****326.25</b>
DOCUMENT #	NAME	STREET ADDRESS	STREET ADDRESS	
	WYNN, LARRY A.	9220 BONITA BEACH ROAD SE		
		BONITA SPRINGS FL 34135	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	STREET ADDRESS	
	ERICKSON, PHILIP A	1250 TAMiami TRAIL N., #106		
		NAPLES FL 34102	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	STREET ADDRESS	
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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.

SIGNATURE *[Signature]* **LARRY WYNN, G.P.** **august 22, 2000** (941) 947-4848  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (5/00)