

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A21632**

1. Entity Name

**LITTLE ROAD PLAZA, LTD.**

APPROVED  
AND  
FILED

02 MAR -8 PM 1:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0013697 AT

Principal Place of Business

Mailing Address

**2151 CAMDEN WAY  
% DAVID S MITCHELL  
CLEARWATER FL 33759**

**2151 CAMDEN WAY  
% DAVID S MITCHELL  
CLEARWATER FL 33759**



2. Principal Place of Business

**2481 Johnny Ct**

3. Mailing Address

**2481 Johnny Ct**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1, 2002**

City & State

**Palm Harbor**

City & State

**Palm Harbor, FL**

4. FEI Number

**59-2614958**

Applied For

Not Applicable

Zip

**34865**

Country

**FLORIDA**

Zip

**34685**

Country

**FLORIDA**

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

**MITCHELL, DAVID S.**

**2151 CAMDEN WAY**

**CLEARWATER FL 33759**

Name

Street Address (P.O. Box Number is Not Acceptable)

**2481 Johnny Ct**

City

**Palm Harbor**

**FL**

Zip Code

**34685**

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.

DATE

9. Capital Contributions  
as Shown on record.

**\$71,632.00**

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 **COPENHAVER, ROGER D.**  
STREET ADDRESS **6230 SOARING AVE**  
CITY-ST-ZIP **TEMPLE TERRACE FL 33617**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME **MITCHELL, DAVID S.**  
STREET ADDRESS **2151 CAMDEN WAY**  
CITY-ST-ZIP **CLEARWATER FL 33761**

STREET ADDRESS

CITY-ST-ZIP

**2481 Johnny Ct**

**Palm Harbor, FL 34685**

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**300005109119--8**  
**-03/14/02--01080--023**  
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**2/20/02 727-784-3883**

CR2E003 (9/01)

STAPLE CHECK HERE