

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A22578**

1. Entity Name

VILLAGE PLAZA PARTNERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 27 PM 1:29

mf

Principal Place of Business

% KING & SPALDING - ROBERT G. PENNINGTON
191 PEACHTREE ST., N.E.
ATLANTA GA 30303-1763

Mailing Address

% KING & SPALDING - ROBERT G. PENNINGTON
191 PEACHTREE ST., N.E.
ATLANTA GA 30303-1740



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2676147

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BANKS, LILLIAN
360 ORION CT.
MERRITT ISLAND FL 32953

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

\$2,562,505.00

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 # J42200
NAME VILLAGE PLAZA INVEST. CO
STREET ADDRESS % 191 PEACHTREE STREET, N.E.
CITY - ST - ZIP ATLANTA GA 31303-1763

STREET ADDRESS

CITY - ST - ZIP

500003314995--1
-07/06/00--01059--021

*****50.00 *****50.00

DOCUMENT #
NAME
STREET ADDRESS
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STREET ADDRESS

CITY - ST - ZIP

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STREET ADDRESS
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STREET ADDRESS

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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: *Robert G. Pennington* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Robert G. Pennington, Secretary

Date

Daytime Phone #

4/10/00

404/572-3369

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