

# 2001 UNIFORM BUSINESS REPORT (UBR)

0013216 AF

DOCUMENT # **A23206**

1. Entity Name

VISTA 3, LTD.

FILED

01 JAN 26 AM 11:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*ny*

Principal Place of Business

Mailing Address

P.O. BOX 620365

P.O. BOX 620365

ORLANDO FL 32862

ORLANDO FL 32862



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

4. FEI Number

59-2728937

Applied For

Not Applicable

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

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.

\$99.00

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 NATIONAL DR.  
CITY-ST-ZIP ORLANDO FL

STREET ADDRESS 300003624313--4  
CITY-ST-ZIP 02/02/01--01040--024  
\*\*\*\*\*88.75 \*\*\*\*\*88.75

DOCUMENT #  
NAME  
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CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS 300003624313--4  
CITY-ST-ZIP -02/02/01--01040--025  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

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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

LEE PROPERTIES, INC. - GENERAL PARTNER

SIGNATURE:

*Richard T. Lee*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-09-2001

Date

407-857-2835

Daytime Phone #

CR2E003 (11/00)