

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A23771**

1. Entity Name
SUMMERSET WADARVILLE, LTD.



Principal Place of Business
**1085 LAKE DESTINY RD.
MAITLAND FL 32751**

Mailing Address
**3407 TORREY RD
FLINT MI 48507**

FILED

03 OCT -2 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		3. Mailing Address		DUE BY SEPTEMBER 24, 2003 4. FEI Number 38-2708470 Applied For <input type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HEREICH, SAMI 101 S. WYMORE ROAD SUITE 100 ALTAMONTE SPRINGS FL 32714		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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$298,393.81	10. Amount of Capital Contributions in FLORIDA to date. 298,393.81	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	F93000000893	STREET ADDRESS	
NAME	WADARVILLE, INC.	CITY-ST-ZIP	
STREET ADDRESS	3407 TORREY RD.		
CITY-ST-ZIP	FLINT MI 48507		
DOCUMENT #		STREET ADDRESS	900022926899
NAME		CITY-ST-ZIP	09/10/03 01033 002 **526.25
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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]* **8/28/03** **810 235-3200**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE

CR2E003 (4/03)

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SUMMERSET WADARVILLE LTD. **FILED**

3407 Torrey Road
Flint, MI 48507

(810) 235-3200

03 OCT -2 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: 2003 Limited Partnership Report

We are in receipt of the enclosed letter regarding the late filing of the above-referenced form. We were not aware this form was late. The only copy we received this year was the attached which indicated a due date of September 24. This report did not indicate it was a "Second Notice."

We are asking you to please consider waiving the \$400 late fee as we did not receive a copy of this report with a May due date.

Sincerely,



Judy L. Gratsch
Accountant

Enc.