

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A23833**

1. Entity Name

AMERICAN PARKS, A CALIFORNIA LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 29 AM 10:39

Principal Place of Business

5603 N STATE RD #7
FT LAUDERDALE FL 33319

Mailing Address

5603 N STATE RD #7
FT LAUDERDALE FL 33319

2. Principal Place of Business

2440 SE Federal Hwy.

3. Mailing Address

PO Box 359

Suite, Apt. #, etc.

Ste. 600

Suite, Apt. #, etc.

City & State

Stuart, FL

City & State

Stuart, FL

4. FEI Number

95-3433132

Applied For

Not Applicable

Zip

34994

Country

USA

Zip

34995

Country

USA

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

SHARFF, BURTON G

2315 S. CONGRESS AVE.

W. PALM BEACH FL 33406

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.

\$1,951,280.00

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

CRANDALL, ROBERT C

STREET ADDRESS

5603 N STATE RD #7

CITY - ST - ZIP

FT. LAUDERDALE FL 33319

STREET ADDRESS

2440 SE Federal Hwy. Suite 600

CITY - ST - ZIP

Stuart, Fl. 34995

DOCUMENT #

NAME

GARRIS, STANLEY R

STREET ADDRESS

5603 N STATE RD #7

CITY - ST - ZIP

FT LAUDERDALE FL 33319

STREET ADDRESS

2440 SE Federal Hwy. Suite 600

CITY - ST - ZIP

Stuart, Fl. 34995

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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CITY - ST - ZIP

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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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/24/00

Date

Daytime Phone #

CR2E003 (9/99)