

2001 UNIFORM BUSINESS REPORT (UBR)

0009620 AF

DOCUMENT # **A23874**

1. Entity Name

OLDE TIMES SQUARE, LTD.

FILED

01 MAY -1 PM 12:32

Principal Place of Business

**4830 W. KENNEDY BLVD.
SUITE 740. ONE URBAN CENTRE
TAMPA FL 33609**

Mailing Address

**4830 W. KENNEDY BLVD.
SUITE 740. ONE URBAN CENTRE
TAMPA FL 33609**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4890 W. Kennedy Boulevard

Suite, Apt. #, etc.
Suite #850

City & State **Tampa, Florida**

Zip **33609-1863** Country **USA**

3. Mailing Address

4890 W. Kennedy Boulevard

Suite, Apt. #, etc.
Suite #850

City & State **Tampa, Florida**

Zip **33609-1863** Country **USA**

4. FEI Number **59-2761201**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BRAY, JACK H.
4830 W. KENNEDY BLVD.
#740
TAMPA FL 33609**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
4890 W. Kennedy Boulevard
Suite #850
City **Tampa** **FL** Zip Code **33609-1863**

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.

(NOT) Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record. **\$13,692,144.00**

10. Amount of Capital Contributions in FLORIDA to date. **13,692,144.**

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

DOCUMENT # **J47194**
NAME **RICHLAND PROPERTIES, INC**
STREET ADDRESS **4830 W. KENNEDY BLVD.**
CITY-ST-ZIP **TAMPA FL**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **4890 W. Kennedy Blvd. #850**
CITY-ST-ZIP **Tampa, Florida 33609-1863**

STREET ADDRESS
CITY-ST-ZIP

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300004287199-7
05/22/01-0062-014
*****535.00 ***535.00**

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

Samuel K. Ross

4-25-2001

Date

813-286-4140

Daytime Phone #

CR2E003 (11/00)