2000 UNIFORM BUSINESS REPORT (UBR)

					_		
DOCUMENT # A24091 1. Entity Name							
PLANTATION DEVELOPMENT, LTD.					FILED		
Principal Place of Business Mailing Address					00 MAY -2 PM 4: 20		
12800 UNIVERSITY DR. 12800 UNIVERSITY DR. SUITE 260 SUITE 260				SEGRETARY OF STATE TALEAHASSEE, FLORIDA			
FORT MYERS FL 33907-5333 FORT MYERS FL 33907-5338					TAY BAHASSEE, PLONDA		
2. Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc					DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number	59-2770984	Applied For Not Applicable	
Zip	Country	Zip Country		try	5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current I	7. Name and Address of New Registered Agent					
MARINER PROPERTIES, INC.				Name -			
12800 UNIVERSITY DR.				Street Address (P.O. Box Number is Not Acceptable)			
SUITE 260							
FORT MYERS FL 33907-5333				City FL Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its r	register	ed office or registe	red agent, or both,	, in the State of Florida.	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	: Registere	d Agent signature require	d when reinstating)	DATE	
9. Capital Contributions as Shown on record. \$2,079,000.00 in FLORIDA to date.						11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR	
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS ENT Y NOT be changed on the	FITY M	UST BE REGIS	TERED AND AC	TIVE WITH THIS OFFICE. to change a general part	ner.
12.	GENERAL PARTNER		13.			ADDRESS CHANGES ONL	
DOCUMENT#	384829 MARINER PROPERTIES, INC. 12800 UNIVERSITY DR #350 FORT MYERS FL			EET ADORESS			
NAME STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
DOCUMENT#			STR	EET ADDRESS	,		· · · · · ·
STREET ADORESS CITY - ST - ZIP				-ST-ZIP			
DOCUMENT#			STR	EET ADDRESS ·			
STREET ADDRESS CITY - ST - ZIP		·	CITY	-ST-ZIP	· 		
Document# Name			STR	EET ADDRESS			
STREET ADDRESS CITY+ST+ZIP			CITY	-ST-ZIP			
DOCUMENT# NAME			STR	EET ADDRESS	70		001001
STREET ADORESS CITY-ST-ZIP			CITY	-ST-ZIP		****526.25	****526.25
DOCUMENT# NAME			STR	EET ADDRESS	:		
STREET ADDRESS CITY-ST-ZNP				-ST-ZIP			· · · · · · · · · · · · · · · · · · ·
indicated	certify that the information supplied with on this report is true and accurate and ver or trustee empowered to execute this	that my signature shall have ti	ne sam	e legal effect as if i	ection 119.07(3)(i) made under oath; i	, Florida Statutes. I further certi that I am a General Partner of t	ty that the information he limited partnership or

SIGNATURE: OSIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Mariner Properties, Inc.