

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A24091**

1. Entity Name

PLANTATION DEVELOPMENT, LTD.

FILED

02 APR 11 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

12800 UNIVERSITY DR.
SUITE 260
FORT MYERS FL 33907-5333

Mailing Address

12800 UNIVERSITY DR.
SUITE 260
FORT MYERS FL 33907-5333

2. Principal Place of Business

13451 McGregor Blvd.

3. Mailing Address

13451 McGregor Blvd.

Suite, Apt. #, etc.

Suite 27

Suite, Apt. #, etc.

Suite 27

City & State

Fort Myers, FL

City & State

Fort Myers, FL

DUE BY MAY 1, 2002

4. FEI Number

59-2770984

Applied For

Not Applicable

Zip

33919

Country

Lee

Zip

33919

Country

Lee

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARINER PROPERTIES, INC.

12800 UNIVERSITY DR.

SUITE 260

FORT MYERS FL 33907-5333

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

13451 McGregor Blvd., Suite 27

City

Fort Myers,

FL

Zip Code

33919

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

DATE

9. Capital Contributions
as Shown on record.

\$2,079,000.00

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

DOCUMENT # 384829
NAME MARINER PROPERTIES, INC.
STREET ADDRESS 12800 UNIVERSITY DR #350
CITY-ST-ZIP FORT MYERS FL

13. ADDRESS CHANGES ONLY

STREET ADDRESS 13451 McGregor Blvd. Suite 27
CITY-ST-ZIP Fort Myers, FL 33919

DOCUMENT #
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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

SIGNATURE:

Signature REQUIRED

2/12/02

941-481-2011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)