

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A24275**

1. Entity Name

EDGEWATER NORTH LOT TWO ASSOCIATES, LTD.

FILED

00 JAN 18 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5401 S. KIRKMAN ROAD
SUITE 515
ORLANDO FL 32819

Mailing Address

5401 S. KIRKMAN ROAD
SUITE 515
ORLANDO FL 32811-7177



2. Principal Place of Business

4305 VINELAND RD.

3. Mailing Address

← SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE G15A

City & State

City & State

ORLANDO FL

Zip

Country

Zip

Country

32811

USA

4. FEI Number

59-2784285

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROHDIE, ROBERT C
5401 S. KIRKMAN ROAD
SUITE 515
ORLANDO FL 32819

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
4305 VINELAND RD. STE. G15A
City **ORLANDO** FL Zip Code **32811**

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.

\$100.00

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 # **J61649**
NAME **EDGEWATER NORTH LOT TWO DEVELOPERS, INC.**
STREET ADDRESS **5401 S. KIRKMAN ROAD**
CITY - ST - ZIP **ORLANDO FL 32819**

STREET ADDRESS **4305 VINELAND RD. STE. G15A**
CITY - ST - ZIP **ORLANDO, FL 32811**

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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 ROBERT C ROHDIE** 1/11/00 407-650-1958
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #