

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A25173**

1. Entity Name

TOWERS OF CORAL SPRINGS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -1 PM 12: 06

mf

Principal Place of Business

2855 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

Mailing Address

2855 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065-1405



2. Principal Place of Business

2825 University Dr.

3. Mailing Address

2825 University Dr.

Suite, Apt. #, etc.

#350

Suite, Apt. #, etc.

#350

City & State

CORAL SPRINGS, FL.

City & State

CORAL SPRINGS FL.

Zip

33065

County

BROWARD

Zip

33065

County

BROWARD

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0035795

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ORNER, HOWARD

2855 UNIVERSITY DRIVE

CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

Name

S. HOWARD ORNER

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

2825 University Drive

Suite 350

City

CORAL SPRINGS

FL

Zip Code

33065

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]

Pres. S. HOWARD ORNER

4/27/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions

\$500.00

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 # **J89912**
NAME **TOWERS OF CORAL SPRINGS, INC.**
STREET ADDRESS **2855 UNIVERSITY DRIVE**
CITY - ST - ZIP **CORAL SPRINGS FL**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **2825 University Drive**
CITY - ST - ZIP **#350, CORAL SPRINGS, FL.**
33065

DOCUMENT #
NAME
STREET ADDRESS
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

S. HOWARD ORNER

Date

4/27/00

Daytime Phone #

CR 1000 0000