

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A25382**

1. Entity Name

LAKEWEST EQUITY PROPERTIES, LTD.

FILED

2002 FEB 26 PM 5: 22

Principal Place of Business

C/O ATLAS PARTNERS
55 E/ MONROE, SUITE 1890
CHICAGO IL 60603

Mailing Address

C/O ATLAS PARTNERS
55 E/ MONROE, SUITE 1890
CHICAGO IL 60603

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

36-3186020

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALTES, MICHAEL A

~~4405 WOODMERE STREET~~ 4219 Lexington Avenue
JACKSONVILLE FL 32210

Name

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

City

FL

Zip Code

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.

\$1,400.00

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 #

NAME

STREET ADDRESS

CITY-ST-ZIP

RUTTENBERG, ROGER F.
55 E. MONROE, SUITE 1890
CHICAGO IL 60603

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

849233
LAKEWEST EQUITY, INC.
55 E. MONROE, SUITE 1890
CHICAGO IL 60603

STREET ADDRESS

CITY-ST-ZIP

600005041686--0

03/04/02 01104-011

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14. I hereby certify that the information submitted 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 receive this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Ruttenberg

2/4/02

312/516-5702

Date

Daytime Phone #

CR2E003 (9/01)