

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

0018001  
AT

DOCUMENT # **A25857**

1. Entity Name  
**EMERALD LAKE PROPERTIES, LTD.**

02 MAY 31 PM 2:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**6160 SO. SYRACUSE WAY  
GREENWOOD VILLAGE CO 80111**

Mailing Address  
**6160 SO. SYRACUSE WAY  
GREENWOOD VILLAGE CO 80111**

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 **59-3227833**

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

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. **\$1,939,784.00**

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	<b>F93000004837 CHATEAU COMMUNITIES, INC. 6160 SO. SYRACUSE WAY GREENWOOD VILLAGE CO 80111</b>	STREET ADDRESS	<b>800005695238--7 -06/06/02--01085--006 *****88.75 *****88.75</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	<b>800005695238--7 -06/06/02--01085--007 *****437.50 *****437.50</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	

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: BY: *EMERALD LAKE PROPERTIES, LTD.*  
*BY: CHATEAU COMMUNITIES, INC.*  
*Signature of P. MONTAGNA, CEO* 4/24/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)