

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A26132

1. Entity Name

CONGO RIVER GOLF AND EXPLORATION CO. -TAMPA LIM

Principal Place of Business

3180 RACQUETCLUB DRIVE  
TRAVERSE CITY MI 49684

Mailing Address

3180 RACQUETCLUB DRIVE  
TRAVERSE CITY MI 49684-4797

2. Principal Place of Business

3180 Racquet Club Drive

Suite, Apt. #, etc.

Suite G

City & State

Traverse City, MI 49684

Zip

Country

3. Mailing Address

3180 Racquet Club Drive

Suite, Apt. #, etc.

Suite G

City & State

Traverse City, MI 49684

Zip

Country

4. FEI Number

38-2796297

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CONGO RIVER GOLF AND EXPLORATION CO.  
6312 INTERNATIONAL DRIVE  
ORLANDO FL 32819

7. Name and Address of New Registered Agent

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

\$450,000.00

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 # P18935  
NAME CONGO RIVER GOLF DEVELOP  
STREET ADDRESS 3180 RACQUETCLUB DRIVE  
CITY - ST - ZIP TRAVERSE CITY MI

DOCUMENT #  
NAME VOZZA, GIORGIO  
STREET ADDRESS 111 N. ORANGE AVE.  
CITY - ST - ZIP ORLANDO FL

DOCUMENT #  
NAME HOLLY, DENNIS  
STREET ADDRESS 1515 CASS ST.  
CITY - ST - ZIP TRAVERSE CITY MI

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 9110 Great Heron Circle  
CITY - ST - ZIP Orlando, FL 32836

STREET ADDRESS 3180 Racquet Club Drive, Suite G  
CITY - ST - ZIP Traverse City, MI 49684

STREET ADDRESS 9110 Great Heron Circle  
CITY - ST - ZIP Orlando, FL 32836

STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS 800003292048--2  
CITY - ST - ZIP 06/15/00 01103 010  
\*\*\*526.25 \*\*\*526.25

STREET ADDRESS  
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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

3/20/00 231 944-905

FILED 130 11/00/00

FILED

00 MAY 17 PM 4: 20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE