

# 2002 UNIFORM BUSINESS REPORT (UBR)

0001212 AT

193

DOCUMENT # **A27790**

1. Entity Name

**AUBURN TRACE, LTD.**

**FILED**

**02 AUG -8 PM 2:51**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**MJH**

Principal Place of Business

**1301 S.W. 10TH AVENUE. BLDG. J  
DELRAY BEACH FL 33444**

Mailing Address

**1301 S.W. 10TH AVENUE. BLDG. J  
DELRAY BEACH FL 33444**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0091524**

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

**HINNERS, BRIAN J**

**1301 S.W. 10TH AVENUE, BLDG. J**

**DELRAY BEACH FL 33444**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions as Shown on record.

**\$4,833,490.00**

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 # **G00243900461**  
NAME **AUBURN TRACE JOINT VENT.**  
STREET ADDRESS **1301 S.W. 10TH AVENUE, BLDG. J**  
CITY-ST-ZIP **DELRAY BEACH FL 33444**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**7/2/02 861-278-2482**

CR2E003 (4/02)

IN WITNESS WHEREOF, Grantor has caused these presents to be executed in its name, and its corporate seal to be hereunto affixed, by its proper officers thereunto duly authorized the day and year first above written.

AUBURN TRACE, LTD.

By:

  
Thomas Hinners

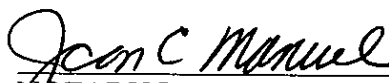
State of Florida

County of PAIM BEACH

I hereby certify that on this day before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgements, the foregoing instrument was acknowledged before me by **Thomas Hinners** and **AUBURN TRACE, LTD.**, freely and voluntarily under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation. **Thomas Hinners** is personally known to me or has produced \_\_\_\_\_ as identification. \_\_\_\_\_ is personally known to me or has produced \_\_\_\_\_ as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 2 day of AUGUST, 2002.



  
NOTARY PUBLIC-State of Florida  
My Commission Expires: 11/16/04

Typed written of stamped name of NOTARY PUBLIC

3d3

**AUBURN TRACE, LTD.**

08-02-02

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Registration/Qualification Section  
Division of Corporations Letter Number: 002A00043742

AUBURN TRACE, LTD.  
1301 SW 10<sup>th</sup> Ave., Bldg. J  
Delray Beach, FL 33444

Subject: AUBURN TRACE, LTD.  
Ref. Number: A27790

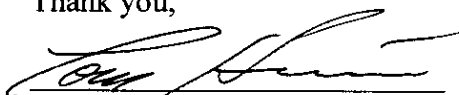
To Whom it may Concern:

We received the enclosed letter from you dated July 16, 2002 indicating that we filed our uniform business reports late.

We are disputing this as the first and only notice we received was in June of 2002, which was the notice that requested that we file our uniform business reports and checks by September 25, 2002, which were the directions we followed.

Enclosed again are the checks and business reports you require. We would sincerely appreciate that the late fees in this matter be waived. Should you have any further questions or requirements, feel free to contact me at 561-278-0053, Ext. 2.

Thank you,

  
Thomas Hinners

**1301 S.W. Ave., Bldg. J Delray Beach, FL 33444**