

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A27938**

1. Entity Name

CREEKWOOD APARTMENTS, LTD.

Principal Place of Business

**9095 S.W. 87TH AVENUE, #777
MIAMI FL 33176**

Mailing Address

**9095 S.W. 87TH AVENUE, #777
MIAMI FL 33176**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

APPROVED
AND
FILED

02 APR -8 AM 11:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DUE BY MAY 1, 2002

4. FEI Number

65-0113761

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MITCHELL, JAMES R.
9095 S.W. 87TH AVENUE, #777
MIAMI FL 33176**

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

DATE

9. Capital Contributions
as Shown on record.

\$50,000.00

10. Ar
in

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BU
NOTE: General Partners MAY NOT be ch**

**ED AND ACTIVE WITH THIS OFFICE.
must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

ADDRESS CHANGES ONLY

DOCUMENT # **511577**
NAME **PROFESSIONAL MANAGEMENT, INC.**
STREET ADDRESS **9095 S.W. 87TH AVE, #777**
CITY-ST-ZIP **MIAMI FL**

CITY-ST-ZIP

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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

James R. Mitchell
03/18/02 305-270-0870

0010670
AT

CR2E003 (9/01)