

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A30196

1. Entity Name  
MARKHAM WOODS REALTY, LTD.



FILED  
03 APR 24 AM 8:26  
SEVENTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

Principal Place of Business  
1766 ALAQUA DRIVE  
LONGWOOD FL 32779

Mailing Address  
1766 ALAQUA DRIVE  
LONGWOOD FL 32779



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3014102

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION  
C/O HOLLAND & KNIGHT  
701 BRICKELL AVENUE, SUITE 3000  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name  
American Information Services, Inc.  
Street Address (P.O. Box Number is Not Acceptable)  
255 South Orange Avenue, Suite 1700  
City Orlando FL Zip Code 32801

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 *Jean M. Fisher, Asst. Secy*  
Signature, typed or printed name of registered agent and title if applicable.

4/14/03  
DATE

9. Capital Contributions  
as Shown on record. \$100.00

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # L77893  
NAME MARKHAM WOODS REALTY, INC  
STREET ADDRESS 1766 ALAQUA DRIVE  
CITY-ST-ZIP LONGWOOD FL 32779

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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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: *Jean M. Fisher* SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/2/03  
Date

707-4440155  
Daytime Phone #

CR2E003 (10/02)