

0003066 AV

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A30570**

1. Entity Name  
**ORLANDO TECHCENTER, LTD.**



**FILED**

**03 MAY -5 PM 7:01**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**MJK**



Principal Place of Business  
**C/O SHUTTS & BROWN, JOHN B. WHITE ESQ.  
250 AUSTRALIAN AVENUE, SUITE 500  
WEST PALM BEACH FL 33401**

Mailing Address  
**C/O SHUTTS & BROWN, JOHN B. WHITE ESQ.  
250 AUSTRALIAN AVENUE, SUITE 500  
WEST PALM BEACH FL 33401**

2. Principal Place of Business  
**c/o Taurus Investment Holdings, LLC (same)**  
Suite, Apt. #, etc.  
**1350 East Newport Center Drive, Suite 206**

City & State  
**Deerfield Beach, FL 33442**

Zip Country Zip Country

**DUE BY MAY 1, 2003**

4. FEI Number **65-0230996** Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**CORPORATION COMPANY OF MIAMI  
1500 MIAMI CENTER  
201 S. BISCAYNE BLVD.  
MIAMI FL 33131**

**7. Name and Address of New Registered Agent**

Name  
**KAY LAW OFFICES**  
Street Address (P.O. Box Number is Not Acceptable)  
**ATTN: JAMES R. KAY, ESQUIRE**  
**11505 FAIRCHILD GARDENS AVE., SUITE 203**  
City  
**PALM BEACH GARDENS** **FL** Zip Code  
**33410**

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 *James R. Kay, President*  
Signature, typed or printed name of registered agent and title if applicable.

DATE  
**4/30/03**

9. Capital Contributions  
as Shown on record. **\$4,100,000.00**

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**

DOCUMENT # **L97760**  
NAME **ORLANDO TECHCENTER, INC.**  
STREET ADDRESS **250 AUSTRALIAN AVE. SUITE 500**  
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS **c/o Taurus Investment Holdings, LLC**  
CITY-ST-ZIP **1350 East Newport Center Dr., Ste 206**  
**Deerfield Beach, FL 33442**

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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: *Linda G. Kassaf* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**LINDA G KASSAF 4/29/03 954-428-4555**

20030503

STAPLE CHECK HERE