

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A30593

1. Entity Name

ALHAMBRA DEVELOPMENT GROUP, LTD.

A30593

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUN -5 PM 12:59

Principal Place of Business
215 North Eola Drive
Orlando FL 32801

Mailing Address
215 North Eola Drive
Orlando FL 32802-2028

2. Principal Place of Business
5145 City Street

3. Mailing Address
5145 City Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Orlando FL

City & State
Orlando FL

4. FEI Number
59-3032444

Applied For
Not Applicable

Zip Country
32839 US

Zip Country
32839 US

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

Johnson, Loran A.
215 North Eola Drive
Orlando FL 32801

Name
Slater, Joel K.
Street Address (P.O. Box Number is Not Acceptable)
5145 City Street

City Orlando FL Zip Code 32839

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

Joel K. Slater
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

5/30/00
DATE

9. Capital Contributions as Shown on record. \$ 99.00

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 # F17041
NAME D.S.A. of Miami, Inc.
STREET ADDRESS 5145 City Street
CITY-ST-ZIP Orlando FL 32839

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # P97000106851
NAME Cansouth Development Corp.
STREET ADDRESS 5145 City Street
CITY-ST-ZIP Orlando FL 32839

STREET ADDRESS
CITY-ST-ZIP

600003283666--4
06/09/00 01111-004
***141.25 ***141.25

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.

CANSOUTH DEVELOPMENT CORP.

By: Joel K. Slater Vice President

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/30/00

Date

407-851-6252

Daytime Phone #