

2001 UNIFORM BUSINESS REPORT (UBR)

0017979 AF

DOCUMENT # **A30788**

1. Entity Name

SANTE FE TOWNHOMES, A LIMITED PARTNERSHIP

FILED

01 APR 30 PM 3:47

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



DO NOT WRITE IN THIS SPACE

Principal Place of Business 900 BROOKSTONE CENTRE PARKWAY P.O. BOX 6566 COLUMBUS GA 31995	Mailing Address 900 BROOKSTONE CENTRE PARKWAY P.O. BOX 6566 COLUMBUS GA 31995
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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 58-1912886	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION INFORMATION SERVICES, INC. 502 EAST PARK AVENUE TALLAHASSEE FL 32301
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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. (NOT) Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. \$98.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 #	P04689
NAME	FLOURNOY DEV. CO.
STREET ADDRESS	900 BROOKSTONE CEN. PKWY
CITY-ST-ZIP	COLUMBUS GA
DOCUMENT #	
NAME	FLOURNOY, JOHN F.
STREET ADDRESS	900 BROOKSTONE CEN. PKWY
CITY-ST-ZIP	COLUMBUS GA
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	FF \$141.25
STREET ADDRESS	
CITY-ST-ZIP	000004274660--2
	-05/21/01--01171--002
	****141.25 ****141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: *John F. Flournoy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone # _____

CF2E003 (11/00)