

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A31011

1. Entity Name

OCALA AIRPORT COMMERCE CENTER, LTD.

Principal Place of Business

11635 NORTHWEST FIRST AVENUE  
GAINESVILLE FL 32607

Mailing Address

11635 NORTHWEST FIRST AVENUE  
GAINESVILLE FL 32607

FILED

02 APR 16 AM 11:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-3055455

Applied For

Not Applicable

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

CURTIS, JOHN M.

11635 NORTHWEST 1ST AVENUE

GAINESVILLE FL 32607

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.

\$72,750.00

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 # S21687  
NAME Ocala ARPT CMRC CNTR, INC  
STREET ADDRESS 11635 N.W. 1ST AVE.  
CITY-ST-ZIP GAINESVILLE FL

STREET ADDRESS

CITY-ST-ZIP

400005350214--8

-04/26/02--01007--020

\*\*\*\*535.00 \*\*\*\*535.00

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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

Ocala Airport Commerce Center, Inc., The General  
John M. Curtis, President 4/3/02 Partner

Date 252 222 002 Daytime Phone #

CR2E003 (9/01)