

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A31531

1. Entity Name

OLD FLORIDA PLANTATION, LTD.

Principal Place of Business

**7414 SPARKLING LAKE ROAD
ORLANDO FL 32819**

Mailing Address

**7414 SPARKLING LAKE ROAD
ORLANDO FL 32819**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROEDER, LOUIS III
7414 SPARKLING LAKE ROAD
ORLANDO FL 32819**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

FILED

01 FEB -9 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3088093

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$1,816,992.00

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 # **B95000000177**
NAME **LUC LAKE HANCOCK LIMITED PARTNERSHIP**
STREET ADDRESS **BOX 460, 300 GREENBRIAR RD.**
CITY-ST-ZIP **SUMMERSVILLE WV 26651**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **ROEDER, LOUIS III**
NAME **7414 SPARKLING LAKE ROAD**
STREET ADDRESS **ORLANDO FL 32819**
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-31-01

Date

407-372-4194

Daytime Phone #

CR2E003 (11/00)