

2002 UNIFORM BUSINESS REPORT (UBR)

0008643 AT

DOCUMENT # **A92000000048**

1. Entity Name

SMUGGLERS COVE PARTNERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JAN 29 PM 3:57

Principal Place of Business
**5505 N. ATLANTIC AVENUE, SUITE 115
COCOA BEACH FL 32931**

Mailing Address
**5505 N. ATLANTIC AVENUE, SUITE 115
COCOA BEACH FL 32931**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number **59-3151113**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MCPHILLIPS, JACQUELINE
5505 N. ATLANTIC AVENUE, SUITE 115
COCOA BEACH FL 32931**

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. **\$2,521,959.00**

10. Amount of Capital Contributions in FLORIDA to date. **2,521,859**

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 # **V24984**
NAME **HERITAGE PARTNERS GROUP, INC**
STREET ADDRESS **5505 N. ATLANTIC AVENUE, SUITE 115**
CITY-ST-ZIP **COCOA BEACH FL 32931**

STREET ADDRESS

CITY-ST-ZIP

8000004881348-1
-02/05/02--01085--008
******535.00 ****535.00**

DOCUMENT # **N46775**
NAME **AFFORDABLE HOUSING SOLUTIONS FOR FL., INC.**
STREET ADDRESS **2730 S.W. 3RD AVENUE, SUITE 202**
CITY-ST-ZIP **MIAMI, FL 33129**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **N98000000959**
NAME **NATIONAL DEVELOPMENT FOUNDATION, INC.**
STREET ADDRESS **4250 ALAFAYA TRAIL #212-330**
CITY-ST-ZIP **OVEDO IL 32765-9424**

STREET ADDRESS

CITY-ST-ZIP

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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 the report as required by Chapter 620, Florida Statutes

SIGNATURE

Signature of Jacqueline McPhillips
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-25-02 (32) 799-4090
Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE