

# 2001 UNIFORM BUSINESS REPORT (UBR)

001274 AF

**DOCUMENT #** A93000000425

**1. Entity Name**

HERITAGE PHOENIX, LTD.

**Principal Place of Business**      **Mailing Address**

5505 N. ATLANTIC AVE., #115      5505 N. ATLANTIC AVE., #115  
COCOA BEACH FL 32931      COCOA BEACH FL 32931

**2. Principal Place of Business**      **3. Mailing Address**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

**FILED**

01 JAN 31 AM 11:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

**4. FEI Number** 59-3176355      **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**

MCPHILLIPS, JACQUELINE  
5505 N. ATLANTIC AVE., #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. (NOTE: Registered Agent signature required when reinstating)      DATE

**9. Capital Contributions as Shown on record.** \$1,000.00      **10. Amount of Capital Contributions in FLORIDA to date.** 1,000.00      **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 #	P93000075715	STREET ADDRESS	
NAME	HERITAGE PARTNERS GROUP VIII, INC.	CITY-ST-ZIP	
STREET ADDRESS	5505 N. ATLANTIC AVE., #115		
CITY-ST-ZIP	COCOA BEACH FL 32931		
DOCUMENT #	766122	STREET ADDRESS	
NAME	THE WEST PERRINE COMMUNITY DEV. CORP. INC.	CITY-ST-ZIP	
STREET ADDRESS	17623 HOMESTEAD AVENUE		
CITY-ST-ZIP	MIAMI FL 33157		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

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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      381-99-4090  
Date      Daytime Phone #

CR2E003 (11/00)