

2001 UNIFORM BUSINESS REPORT (UBR)

0012760 AF

DOCUMENT # **A93000000426**

1. Entity Name

MANATEE POND, LTD.

FILED

01 JAN ~1 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5505 N. ATLANTIC AVE., STE. 115 COCOA BEACH FL 32931	Mailing Address 5505 N. ATLANTIC AVE., STE. 115 COCOA BEACH FL 32931
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State

Zip	Country	Zip	Country
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4. FEI Number 59-3176352	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCPHILLIPS, JACQUELINE 5505 N. ATLANTIC AVE., STE. 115 COCOA BEACH FL 32931

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.	\$2,040,100.00
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10. Amount of Capital Contributions in FLORIDA to date.	2,040,100.00
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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 #	P93000075715
NAME	HERITAGE PARTNERS GROUP VIII, INC.
STREET ADDRESS	5505 N. ATLANTIC AVE., STE. 115
CITY-ST-ZIP	COCOA BEACH FL 32931
DOCUMENT #	N16583
NAME	MEMPHIS AREA COMMUNITY DEVELOPMENT CORP IN
STREET ADDRESS	5404 FIRST ST., SUITE 210
CITY-ST-ZIP	BRADENTON FL 34205
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	700003654377--8 -02/06/01--01084--007 *****535.00 *****535.00
STREET ADDRESS	
CITY-ST-ZIP	
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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/20/01 **321) 799-4090**
Date Daytime Phone #

CR2E003 (11/00)