

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

000671
AT

DOCUMENT # A93000000867

1. Entity Name

MINTO TOWNGATE LIMITED PARTNERSHIP

02 APR 25 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4400 WEST SAMPLE ROAD, SUITE 200
COCONUT CREEK FL 33073

Mailing Address

4400 WEST SAMPLE ROAD, SUITE 200
COCONUT CREEK FL 33073



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0426572

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

JOBLOVE, MICHAEL D

8211 WEST BROWARD BLVD. SUITE 310
FORT LAUDERDALE FL 33324

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.

\$10,250,310.00

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 # V55983
NAME MINTO COMMUNITIES (PEMBROKE), INC.
STREET ADDRESS 4400 WEST SAMPLE ROAD, SUITE 200
CITY-ST-ZIP COCONUT CREEK FL 33073-3450

STREET ADDRESS

CITY-ST-ZIP

900005451359--4

DOCUMENT #
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CITY-ST-ZIP

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CITY-ST-ZIP

CR2E003 (9/01)

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

MINTO COMMUNITIES, INC. - GENERAL PARTNER

SIGNATURE:

Chris Rodger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/16/02 954-973-4490
Date Daytime Phone #