

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

00186

DOCUMENT # A93000001380

1. Entity Name
PRAXIS OF DEERFIELD BEACH II, LTD.



FILED
Jul 30, 2003 8:00 A.M.
Secretary of State

Principal Place of Business
1111 S.W. 15TH STREET
DEERFIELD BEACH FL 33441

Mailing Address
3105 WEST SCENIC DRIVE
DANIELSVILLE PA 18038



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2003

4. FEI Number **65-0451188**

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

BRADY & BRADY PA
370 N. CAMINO GARDENS BLVD.
SUITE 200C
BOCA RATON FL 33432

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record.

\$1,574,300.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. 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 # ~~N42380~~
NAME ~~NEW HORIZON COMMUNITY DEVELOPMENT CORP.~~
STREET ADDRESS ~~2831 N. STATE RD. 7, #201~~
CITY-ST-ZIP ~~LAUDERHILL FL 33313~~

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **P93000086360**
NAME **LRH, INC.**
STREET ADDRESS **3105 W. SCENIC DR.**
CITY-ST-ZIP **DANIELSVILLE PA 18038**

STREET ADDRESS

CITY-ST-ZIP

100017918461
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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 this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Stephanie M. Gek
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/30/03 6108376280

CR2E003 (10/02)