

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A93000001457

1. Entity Name

236 PROPERTIES, LTD.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

101 S. COURTENAY PARKWAY, SUITE 201  
MERRITT ISLAND FL 32952-4855

Mailing Address

101 S. COURTENAY PARKWAY, SUITE 201  
MERRITT ISLAND FL 32952-4855

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3217036

Applied For

Not Applied

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIELVOGEL, LEONARD

101 S. COURTENAY PARKWAY, SUITE 201  
MERRITT ISLAND FL 32952-4855

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.

\$2,940,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,661,675.00

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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

SPIELVOGEL, LEONARD  
101 S. COURTENAY PARKWAY SUITE 201  
MERRITT ISLAND FL 32952-4855

STREET ADDRESS

CITY - ST - ZIP

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01/21/00-01019-003

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DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

SPIELVOGEL, JEAN C  
101 S. COURTENAY PARKWAY SUITE 201  
MERRITT ISLAND FL 32952-4855

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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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED

Leonard Spielvogel, General Partner

1.7.00

321/453-2333

Date

Daytime Phone #