

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000000541**

1. Entity Name

OAKS CAMPGROUND, LTD.

FILED

02 MAR 11 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**30045 JOHNSON POINT ROAD
LEESBURG FL 34748**

Mailing Address
**30045 JOHNSON POINT ROAD
LEESBURG FL 34748**



2. Principal Place of Business

3. Mailing Address

5551 S.W. 18TH TERRACE

5551 S.W. 18TH TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

BUSHNELL, FL

BUSHNELL, FL

4. FEI Number

59-3236928

Applied For

Not Applicable

Zip

Country

33513

U.S.A.

Zip

Country

33513

U.S.A.

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

**PURSER, WILLIAM D
30045 JOHNSON POINT ROAD
LEESBURG FL 34748**

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

W.D. PURSER

W.D. PURSER, GEN. PARTNER

FEB. 18, 2002

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

DATE

9. Capital Contributions
as Shown on record.

\$1,275,000.00

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
**PURSER, WILLIAM D TRUSTEE
30045 JOHNSON POINT ROAD
LEESBURG FL 34748**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**PURSER, WILLIAM D II
ROUTE 3, BOX 164
BUSHNELL FL 33513**

STREET ADDRESS

CITY-ST-ZIP

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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: **W.D. PURSER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FEB. 18, 2002 352-793-7117

Date

Daytime Phone #

CR2E003 (9/01)

0016284 AT

STAPLE CHECK HERE