

2002 UNIFORM BUSINESS REPORT (UBR)

10/2

0001056
AT

DOCUMENT # **A94000001679**

1. Entity Name
MANGONIA RESIDENCE I, LTD.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 OCT 16 PM 2:56

Principal Place of Business
**2210 N. AUSTRALIAN AVENUE
WEST PALM BEACH FL 33407**

Mailing Address
**319 CLEMATIS STREET, SUITE 409
WEST PALM BEACH FL 33401-4618**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
4016 Broadway
Suite, Apt. #, etc.

DUE BY SEPTEMBER 25, 2002

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip
33407

Country
PP

4. FEI Number **65-0539957**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32501**

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

200008410392
10/16/02--01087--006 **437.50

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

9. Capital Contributions as Shown on record. **\$8,993,976.00**

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 | |
|---|---|
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | N96000003114 THE PARTNERSHIP, INC. 319 CLEMATIS STREET, SUITE 409 WEST PALM BEACH FL 33401 |
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| 13. ADDRESS CHANGES ONLY | |
|--------------------------|----------------------------------|
| STREET ADDRESS | 4016 Broadway |
| CITY-ST-ZIP | West Palm Beach, FL 33407 |
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**FF \$526.75
CUS 8.75**

200008410392
10/16/02--01087--007 **37.50

Well
10/16/02

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: **John Corbett**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER: **John Corbett, President/CEO, The Partnership, Inc., 8-2202**

Daytime Phone #: **561 841 3500**

CR2E003 (4/02)

MANGONIA RESIDENCE I, LTD.

292

September 30, 2002

Department of State
409 East Gaines Street
Tallahassee, FL 32399

To Whom It May Concern:

We are currently in receipt of your letter number 402A00052054, dated September 11, 2002, which states we are being charged a late fee.

The check that was enclosed had been sent well before the stated due date of September 25, 2002 to your office. Due to an incorrect mailing address of the original documentation a request was made to your office requesting another submission of this report. Payment was submitted in a timely manner once the correspondence was received in our accounting department.

We are enclosing the original check for payment in the amount of \$ 437.50 and a supplemental check in the amount of \$ 97.50 which covers all required filing and documentation fees.

If you have any questions concerning the amount submitted to you, please call the number listed below for the accounting department.

Thank you for your time and consideration of this matter.

Robert Todd
Controller

#19

*Did not receive
1st notice
- Let*