

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A94000001789

1. Entity Name
PRESBYTERIAN HOMES OF PASCO NPR LIMITED PARTNERS
HIP



FILED

03 MAY -9 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2335 NORTH BANK DRIVE
COLUMBUS OH 43220

Mailing Address
2335 NORTH BANK DRIVE
COLUMBUS OH 43220

2. Principal Place of Business
5852 Sea Forest Dr.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
New Port Richey, FL

City & State

4. FEI Number 59-3283881

Applied For

Not Applicable

Zip Country

Zip Country

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

9. Capital Contributions as Shown on record. \$5,241,060.00

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 # N99000007449
NAME NATIONAL CHURCH RES. OF NEW PT RICHEY, INC
STREET ADDRESS 2335 NORTH BANK DRIVE
CITY-ST-ZIP COLUMBUS OH 43220

STREET ADDRESS

CITY-ST-ZIP

100018576961
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STREET ADDRESS

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:

REMARK R. Ricketts
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/15/03

(614) 451-2151

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE