

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A95000001240

1. Entity Name

WESTGATE PALATKA INVESTORS, LTD.

FILED

01 APR 24 PM 5:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

A95000001240

2. Principal Place of Business

3. Mailing Address

24401 HARBOUR VIEW DRIVE 24401 HARBOUR VIEW DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PONTE VEDRA BEACH, FL

City & State

PONTE VEDRA BEACH, FL

4. FEJ Number

NOT APPLICABLE

Applied For

☒ Not Applicable

Zip

32082

Country

U.S.A.

Zip

32082

Country

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

Name

CHARLES L HOOD

Street Address (P.O. Box Number is Not Acceptable)

24401 HARBOUR VIEW DRIVE

City

PONTE VEDRA BEACH, FL

Zip Code

32082

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

Charles L Hood

GENERAL PARTNER

4/23/01

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.

\$750,000.00

10. Amount of Capital Contributions in FLORIDA to date.

-0-

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 # A95000001240
NAME CHARLES L HOOD
STREET ADDRESS 24401 HARBOUR VIEW DRIVE
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

STREET ADDRESS
CITY-ST-ZIP 700004163997-5
-05/09/01--01010--008
****150.00 ****150.00

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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:

Charles L Hood

APRIL 23, 2001 (904) 280-2621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003(11/00)