

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

A96000000007

1. Entity Name

COLONNA PROPERTIES, LTD.

Principal Place of Business

1100 S. POWERLINE ROAD
SUITE 110
DEERFIELD BEACH FL 33442

Mailing Address

1100 S. POWERLINE ROAD
SUITE 110
DEERFIELD BEACH FL 33442-8156

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

COLONNA PROPERTIES, INC.
1100 S. POWERLINE ROAD
SUITE 110
DEERFIELD BEACH FL 33442

4. FEI Number

65-0664809

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

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.

SIGNATURE

Girola Colonna

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-20-00

9. Capital Contributions

\$50,000.00

as Shown on record

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 #	P960000000050	STREET ADDRESS	77 438.75
NAME	COLONNA PROPERTIES, INC.	CITY - ST - ZIP	500003284505--4
STREET ADDRESS	1100 S. POWERLINE ROAD		06/12/00--01029--006
CITY - ST - ZIP	DEERFIELD BEACH FL 33442		****288.75 ****288.75
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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:

Girola Colonna

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

3-20-00

DAYTIME PHONE #

951-571-8740