

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0007788 AT

DOCUMENT # A96000001053



1. Entity Name
HEATHROW LAND COMPANY LIMITED PARTNERSHIP

FILED

03 MAY -7 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
C/O 4/46A CORP.
1275 LAKE HEATHROW LANE
HEATHROW FL 32746

Mailing Address
C/O 4/46A CORP.
1275 LAKE HEATHROW LANE
HEATHROW FL 32746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number 59-3381819

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

APOSTOLICAS, GEORGE P
1275 LAKE HEATHROW LANE
HEATHROW FL 32746

Name Gray, N. Dwayne Jr Esq
Greenspoon, Marder, Hirschfeld et al
Street Address (P.O. Box Number is Not Acceptable)
135 West Central Blvd., Suite 1100

City
Orlando

FL

Zip Code
32801

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

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

DATE

4-25-03

9. Capital Contributions
as Shown on record.

\$1,700,000.00

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 # P96000025234
NAME 4/46A CORP.
STREET ADDRESS 1275 LAKE HEATHROW LANE
CITY-ST-ZIP HEATHROW FL 32746

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/29/03

Date

(407) 333-1003 ext 29

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE