

2001 UNIFORM BUSINESS REPORT (UBR)

0005360 AF

DOCUMENT # **A96000001292**

1. Entity Name

DADELAND VISTA, LTD.

Principal Place of Business

**7700 NORTH KENDALL DRIVE, SUITE 200
MIAMI FL 33156**

Mailing Address

**7700 NORTH KENDALL DRIVE, SUITE 200
MIAMI FL 33156**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0679622

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

FILED

01 MAY -1 AM 11:47

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GREEN, ELIZABETH A ESQUIRE
7700 NORTH KENDALL DRIVE, SUITE 200
MIAMI FL 33156**

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

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.

\$500,000.00

10. Amount of Capital Contributions in FLORIDA to date.

\$500,000.00

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 # **P96000057409**
NAME **DADELAND VISTA, INC.**
STREET ADDRESS **7700 NORTH KENDALL DRIVE, SUITE 200**
CITY-ST-ZIP **MIAMI FL 33156**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

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CITY-ST-ZIP

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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

Dadeland Vista, Inc. a Florida Corp., General Partner

SIGNATURE: By: *Elizabeth A. Green* **ELIZABETH A. GREEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Elizabeth A. Green, Vice President

4/24/01 (305) 670-1000

Date

Daytime Phone #

CR2E003 (11/00)