

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000001996

1. Entity Name

RIVERTOWNE SQUARE ASSOCIATES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 13 PM 1:33

Principal Place of Business
3612 WEST HILLSBORO BLVD.
DEERFIELD BEACH FL 33442

Mailing Address
% JOAN I. NEUWIRTH, P.A.
9897 N.W. 2 COURT
PLANTATION FL 33324-7004



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
9810 NW 10 ST

City & State

City & State
Plantation FL

4. FEI Number 65-0708464

Applied For
Not Applicable

Zip

Country

Zip 33322

Country USA

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

MCAYA REAL ESTATE, INC.
3612 W. HILLSBORO BLVD.
DEERFIELD BEACH FL 33342

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. \$1,900,000.00

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 # P96000088505
NAME RIVERTOWNE SQUARE ASSOCIATES, INC.
STREET ADDRESS 3612 WEST HILLSBORO BLVD.
CITY - ST - ZIP DEERFIELD BEACH FL 33442

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

800003326108-4
-07/18/00-01033-001
****437.50 ****437.50

DOCUMENT #
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STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

800003326108-4
-07/18/00-01033-002
*****88.75 *****88.75

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/23/00 954-3607444