

2002 UNIFORM BUSINESS REPORT (UBR)

0007942 AT

DOCUMENT # A96000002359

1. Entity Name

HERITAGE (NAPLES) PIP LIMITED PARTNERSHIP

FILED
02 JUN 10 AM 9 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Bm page

Principal Place of Business

C/O AVNTI PROPERTIES GROUP, J.V.
431 E. HORATIO AVE., SUITE 210
MAITLAND FL 32751

Mailing Address

C/O AVNTI PROPERTIES GROUP, J.V.
431 E. HORATIO AVE., SUITE 210
MAITLAND FL 32751



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3419468

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

SHAPIRO, MARVIN

C/O Avanti Properties Group

431 E. HORATIO AVE., SUITE 210

MAITLAND FL 32751

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.

DATE

9. Capital Contributions as Shown on record.

\$3,500,000.00

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 # 091226900034
NAME
STREET ADDRESS 431 EAST HORATIO AVE., SUITE 210
CITY-ST-ZIP MAITLAND FL 32751

STREET ADDRESS
CITY-ST-ZIP
BK

DOCUMENT #
NAME
STREET ADDRESS Avanti Properties Group, J.V.
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
3000006162939-1
-07/02/02-01058-016
*****88.75 *****88.75

DOCUMENT #
NAME K/A Avanti Capital Associates
STREET ADDRESS 431 E. Horatio #210
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
3000006162939-1
-07/02/02-01058-017
*****437.50 *****437.50

DOCUMENT #
NAME
STREET ADDRESS Maitland, FL 32751
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS G02163900074
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Beila Sherman*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/11/02 407-6288488
Date Daytime Phone #

CR2E003 (9/01)