

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000002361**

1. Entity Name

AVILA LIMITED PARTNERSHIP

Principal Place of Business

**2154 TRADE CENTER WAY, SUITE 3
NAPLES FL 34109**

Mailing Address

**2154 TRADE CENTER WAY, SUITE 3
NAPLES FL 34109**

2. Principal Place of Business c/o

Landmark Development Group

Suite, Apt. #, etc.

5668 Strand Court, #108

City & State

Naples, FL

3. Mailing Address c/o

Landmark Development Group

Suite, Apt. #, etc.

5668 Strand Court, #108

City & State

Naples, FL

Zip

34110

Country

US

Zip

34110

Country

US

6. Name and Address of Current Registered Agent

CLASP INC.

C/O CUMMINGS & LOCKWOOD

3001 TAMIAMI TRAIL N., 4TH FLOOR

NAPLES FL 34103

FILED

01 JUL -6 AM 8:47

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0782732

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

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.

\$1,500.00

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

DOCUMENT # **P97000067245**
NAME **BDG-AVILA AT GREY OAKS, INC.**
STREET ADDRESS **2154 TRADE CENTER WAY, SUITE 3**
CITY-ST-ZIP **NAPLES FL 34109**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

5668 Strand Court, #108

CITY-ST-ZIP

Naples, FL 34110

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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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

BDG - Avila at Grey Oaks, Inc., General Partner

SIGNATURE:

By **Arthur A. Shafran, President**

941-597-8400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

0010891 AF

CR2E003 (11/00)