

# 2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A97000000416

1. Entity Name

TBI/NAPLES LIMITED PARTNERSHIP

FILED

01 APR 25 PM 1:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3103 PHILMONT AVENUE  
HUNTINGDON VALLEY PA 19006

Mailing Address

3103 PHILMONT AVENUE  
HUNTINGDON VALLEY PA 19006

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-2883354

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

SCHMIDT, WILLIAM N  
190 OLD COUNTRY ROAD  
WEST PALM BEACH FL 33414

7. Name and Address of New Registered Agent

Name CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road

City Plantation

FL

Zip Code 33324

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

*Connie Bryan*

CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY

4/25/01

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.

\$9,500.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$9,500.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P94000082800  
NAME TOLL FL GP CORP.  
STREET ADDRESS 3103 PHILMONT AVENUE  
CITY-ST-ZIP HUNTINGDON VALLEY PA 19006

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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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.

Kenneth J. Gary, VP of

Toll FL GP Corp., General Partner

4/19/01 (215) 938-8000

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)