

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000000420**

1. Entity Name

THE FLAGLER RESORT, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

100 MAY -3 PM 1:33



DO NOT WRITE IN THIS SPACE

Principal Place of Business

95 CORDOVA STREET
ST. AUGUSTINE FL 32084

Mailing Address

95 CORDOVA STREET
ST. AUGUSTINE FL 32084-4424

2. Principal Place of Business

7380 Sand Lake Road

Suite, Apt. #, etc.

Suite 120

City & State
Orlando, FL

Zip
32819

Country
USA

3. Mailing Address

7380 Sand Lake Road

Suite, Apt. #, etc.

Suite 120

City & State
Orlando, FL

Zip
32819

Country
USA

4. FEI Number **59-3428067**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

\$1,750,000.00

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

DOCUMENT # **P97000015407**
NAME **RCK FLAGLER, INC.**
STREET ADDRESS **95 CORDOVA STREET**
CITY-ST-ZIP **ST. AUGUSTINE FL 32084**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

7380 Sand Lake Road Suite 120

CITY-ST-ZIP

Orlando, FL 32819

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

(SEE K130, 128)