

2002 UNIFORM BUSINESS REPORT (UBR)

0012665 AT

DOCUMENT # A97000001414

1. Entity Name

ATLANTIC CENTER, LTD.

FILED

02 APR -1 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

400 E. LINTON BLVD., STE. G-3
DELRAY BEACH FL 33483

400 E. LINTON BLVD., STE. G-3
DELRAY BEACH FL 33483

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0762623

Applied For

Not Applicable

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

~~POSTERNACK, CHARLES~~
~~400 E. LINTON BLVD., STE. G-3~~
~~DELRAY BEACH FL 33483~~

Name
Charles E. Muller II, Esq.
Street Address (P.O. Box Number is Not Acceptable)
9350 South Dixie Highway
Suite 1550
City Miami FL Zip Code 33156

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 *Charles E. Muller II*
Signature, typed or printed name of registered agent and title if applicable.

Charles E. Muller II, Esq.

3/29/02
DATE

9. Capital Contributions
as Shown on record.

\$2,079,000.00

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 # P97000054924
NAME ATLANTIC CENTER, INC.
STREET ADDRESS 400 E. LINTON BLVD., STE. G-3
CITY-ST-ZIP DELRAY BEACH FL 33483

STREET ADDRESS
CITY-ST-ZIP
100005195461--7
-04/05/02--01047--018
***526.25 ***526.25

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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: *Charles E. Muller II*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/25/2002

Date

Daytime Phone #

305-670-6770

CR2E003 (9/01)

STAPLE CHECK HERE