

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001790

1. Entity Name-
COLONY CLUB MOBILE HOMES LIMITED



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUL -9 PM 2:55

192

0002440 AB

UL 7/22

Principal Place of Business
1501 - 11TH STREET NE
WINTER HAVEN FL 33881

Mailing Address
P. O. BOX 976
WINTER HAVEN FL 33882



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY SEPTEMBER 24, 2003

4. FEI Number 59-3463433

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

HINES, JAMES P ESQUIRE
HINES & ASSOCIATES, P.A.
315 S. HYDE PARK AVE.
TAMPA FL 33606

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$1,012,871.25

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
PHILLIPS, ROBERT C TRUSTEE
927 N. LAKE OTIS DR., SE
WINTER HAVEN FL 33880

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
PHILLIPS, MARTHA A TRUSTEE
1501 - 11TH STREET NE
WINTER HAVEN FL 33881

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SPARROW, PEGGY TRUSTEE
1410 AVE. D, NE
WINTER HAVEN FL 33881

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

SIGNATURE: Peggy Sparrow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

July 7, 2003 (863) 299-6923

Date

Daytime Phone #

CR2E003 (4/03)

202

P. O. Box 976
Winter Haven, FL 33882
July 7, 2003

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

To Whom it May Concern:

This morning I called (850) 245-6051 to ask about the form I received from your office, Document # A97000001790. I was told to write this letter because prior to July 5, 2003, I have never received a copy of the 2003 Uniform Business Report. I was also told that I could correct my name in "Block 12," and to remit a payment of \$526.25.

Thank you for the help given to me during the telephone conversation.

Sincerely,

Peggy Sparrow
Peggy Sparrow

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