

# 2000 UNIFORM BUSINESS REPORT (UBR)

00023771 JAF

**DOCUMENT # A97000001913**  
1. Entity Name  
**CRYSTAL COVE, LTD.**

FILED

00 APR 10 PM 2:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
401 WEST COLONIAL DRIVE, SUITE 7  
ORLANDO FL 32804

Mailing Address  
401 WEST COLONIAL DRIVE, SUITE 7  
ORLANDO FL 32804-6869

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **59-3469137**

Applied For
Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**MACARTHUR, WILLIAM H**  
**401 WEST COLONIAL DRIVE, SUITE 7**  
**ORLANDO FL 32804**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$1,086,976.34**

10. Amount of Capital Contributions in FLORIDA to date. **1,086,976.34**

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 #	P97000076577
NAME	BDC CRYSTAL COVE, INC.
STREET ADDRESS	401 WEST COLONIAL DRIVE, SUITE 7
CITY - ST - ZIP	ORLANDO FL 32804
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	200003219782--2 -04/24/00--01031--025 *****526.25--*****526.25
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

**SIGNATURE:** ELIZABETH S. COUANT **SIGNATURE REQUIRED FOR ALL BDC CRYSTAL COVE, LLC, GP**  
Date: **4/6/00** Daytime Phone #: **407-425-8076**

CR2E003 (9/99)