

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001937

1. Entity Name

STRONG/PINEHURST PARTNERS, LTD.

Principal Place of Business
1201 SOUTH ORLANDO AVENUE, SUITE 360
WINTER PARK FL 32789

Mailing Address
P.O. BOX 276
WINTER PARK FL 32790

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

FILED *mf*

01 MAR 15 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3466604 Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

STRONG, DAVID C
1201 SOUTH ORLANDO AVENUE, SUITE 360
WINTER PARK FL 32789

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.

\$599.00

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 #	P97000077472	STREET ADDRESS	
NAME	STRONG/PINEHURST, INC.		
STREET ADDRESS	1201 SOUTH ORLANDO AVENUE, SUITE 360		
CITY-ST-ZIP	WINTER PARK FL 32789		
DOCUMENT #		STREET ADDRESS	700003889437--7
NAME			-03/21/01-01007-023
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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.

STRONG PINEHURST, INC-GENERAL PARTNER

SIGNATURE: *DAVID C. STRONG* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/6/01 407 629-1800

Date

Daytime Phone #

DAVID C. STRONG, PRESIDENT