

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0019494 AB

DOCUMENT # A97000002050

1. Entity Name

NL CHOBEE, LTD.

02 APR 17 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

% SOUTHERN MANAGEMENT & DEVELOPMENT
21301 POWERLINE RD., STE. 312
BOCA RATON FL 33433

Mailing Address

P.O. BOX 11229
KNOXVILLE TN 37939

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

Zip

Country

Zip

Country

4. FEI Number

58-2348411

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

WALTERS, CLIFFORD L
802 11TH STREET WEST
BRADENTON FL 34205

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.

DATE

9. Capital Contributions
as Shown on record.

\$9,700.00

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 # G83741
NAME BRADEMAN INVESTMENT CORPORATION
STREET ADDRESS 5410 HOMBERG DRIVE
CITY-ST-ZIP KNOXVILLE TN 37919

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # G83740
NAME MANBRADE INVESTMENT CORPORATION
STREET ADDRESS 5410 HOMBERG DRIVE
CITY-ST-ZIP KNOXVILLE TN 37919

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # P96000028490
NAME COAST REALTY, INC.
STREET ADDRESS 1379 LYONS ROAD
CITY-ST-ZIP COCONUT CREEK FL 33063

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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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: *Steven Levin* President Coast Realty 3/6/02 865-584-4175

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)