

# 2002 UNIFORM BUSINESS REPORT (UBR)

0008024 AT

DOCUMENT # A97000002899

1. Entity Name  
BLOCK 68 PARTNERSHIP, LTD.

FILED

02 MAY 22 AM 10:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
558 W. NEW ENGLAND AVE., STE. #210  
WINTER PARK FL 32789

Mailing Address  
P.O. BOX 350  
WINTER PARK FL 32790-0350

2. Principal Place of Business  
533 W. New England Ave

Suite, Apt. #, etc.  
Suite C

City & State  
Winter Park, FL

Zip  
32789

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number  
59-3484763

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

WINTER PARK REDEVELOPMENT MANAGEMENT CORP.  
558 W. NEW ENGLAND AVE., STE. #210  
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name  
Daniel B. Bellows

Street Address (P.O. Box Number is Not Acceptable)  
533 W. New England Ave

Suite C

City  
Winter Park, FL

Zip Code  
32789

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 PRES Daniel B. Bellows 4/6/02

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

9. Capital Contributions  
as Shown on record. \$990.00

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

DOCUMENT # P94000038528  
NAME WINTER PARK REDEVELOPMENT MANAGEMENT CORP.  
STREET ADDRESS P.O. BOX 350  
CITY-ST-ZIP WINTER PARK FL 32790

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

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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: PRES Daniel B. Bellows 4/6/02 407-644-3151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)