2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000000357

1. Entity Name

PARK AVENUE VILLAS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 10 PM 2:59

Principal Place of Business	Mailing Address
3300 SOUTH HIAWASSEE ROAD. SUITE 107 ORLANDO FL 32835	P.O. BOX 4961 ORLANDO FL 32802-4961

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
800 N. HIGHLAND AVE.			
Suite, Apt. #, etc.: SUITE 200		Suite, Apt. #, etc.	
City & State: ORLANDO, FL		City & State	
Zip: 32803	Country: USA	Zip	Country

4. FEI Number 59-3495586 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENT. FLA., INC.
390 NORTH ORANGE AVE., SUITE 1100
ORLANDO FL 32801

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 ______
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: ~~$2,054,050.00~~ ~~1,582,000~~ OK 2,054,050

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 # / NAME / STREET ADDRESS / CITY-ST-ZIP	P97000105907 PARK AVENUE VILLAS, INC. 3300 SOUTH HIAWASSEE ROAD, SUITE 107 ORLANDO FL 32835	STREET ADDRESS / CITY-ST-ZIP	800 N. HIGHLAND AVE., SUITE 200 ORLANDO, FL 32803
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CR2E003 (9/99)

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

PARK AVENUE VILLAS, INC. G.P.

SIGNATURE: SIGNATURE REQUIRED 3-1-00 407/297-1600

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

STEVEN G. KRUPP, PRESIDENT