

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

DOCUMENT # A98000000669

1. Entity Name  
SOFRA INVERNESS (ECK), LTD.



03 APR -2 AM 10:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
808 THIRD STREET, SUITE C  
NEPTUNE BEACH FL 32266

Mailing Address  
245 PEACHTREE CENTER AVE. NE, SUITE 2800  
ATLANTA GA 30303-1227



2. Principal Place of Business  
818 A-1-A North

3. Mailing Address

Suite, Apt. #, etc.  
Suite 203

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State  
Ponte Vedra Beach, FL 32082

City & State

4. FEI Number 59-3506654

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROBERT ROULEAU  
808 THIRD STREET, SUITE C  
NEPTUNE BEACH FL 32266

Name  
Robert Rouleau

Street Address (P.O. Box Number is Not Acceptable)

818 A-1-A North, Suite 203

Ponte Vedra Beach, FL

City  
Ponte Vedra Beach,

FL

Zip Code  
32082

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions  
as Shown on record. \$99.00

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # L98000000300  
NAME SOFRA CITRUS, L.C.  
STREET ADDRESS 808 THIRD STREET, SUITE C  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE: Robert Rouleau, Manager

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

3-24-03 280-0008

CR2E003 (10/02)

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