

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000000826

1. Entity Name

BAINBRIDGE POLO LAKES GP, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 13 PM 1:25

Principal Place of Business

2170 POLO GARDENS DRIVE, SUITE 304
WELLINGTON FL 33414

Mailing Address

2170 POLO GARDENS DRIVE, SUITE 304
WELLINGTON FL 33414-2030



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

12791 W. Forest Hill Blvd Suite #5B
Wellington, FL 33414

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0823461

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BAINBRIDGE POLO LAKES GP, INC.
2170 POLO GARDENS DRIVE, SUITE 304
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name

RICHARD SCHECHTER

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

Bainbridge Companies

City

12791 W. FOREST HILL BLVD #5B

WELLINGTON

FL

Zip Code

33414

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.

\$500,000.00

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 # P98000029926
NAME BAINBRIDGE POLO LAKES GP, INC.
STREET ADDRESS 2170 POLO GARDENS DRIVE, SUITE 304
CITY - ST - ZIP WELLINGTON FL 33414

13. ADDRESS CHANGES ONLY

STREET ADDRESS

12791 W. FOREST HILL BLVD #5B

CITY - ST - ZIP

WELLINGTON, FL 33414

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

800003326928--5

CITY - ST - ZIP

-07/18/00--01083--005

***535.00 ***535.00

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/27/00

Date

5617938955

Daytime Phone #