

2001 UNIFORM BUSINESS REPORT (UBR)

0002545 AF

DOCUMENT # **A98000001391**

1. Entity Name

WENSOUTH SARASOTA, LTD.

FILED

01 MAY -1 PM 5:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**5401 KIRKMAN ROAD, SUITE 725
ORLANDO FL 32819**

Mailing Address

**5401 KIRKMAN ROAD, SUITE 725
ORLANDO FL 32819**



DO NOT WRITE IN THIS SPACE

MLH

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3514589

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KHATIB, RASHID A
5401 KIRKMAN ROAD, SUITE 725
ORLANDO FL 32819**

7. Name and Address of New Registered Agent

Name

Khatib, Rashid A

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

5728 Major Blvd

Suite 601

City

Orlando

FL

Zip Code

32819

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.

(NOT: Registered Agent's signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$250,000.00

10. Amount of Capital Contributions in FLORIDA to date.

0

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 # **P98000050265**
NAME **WENVEST II, INC.**
STREET ADDRESS **5401 KIRKMAN ROAD, SUITE 725**
CITY-ST-ZIP **ORLANDO FL 32819**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

5728 Major Blvd Suite 601

CITY-ST-ZIP

Orlando, FL 32819

STREET ADDRESS

CITY-ST-ZIP

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:

Wenvest II, Inc (G.P.)

4-25-01

407-352-0676

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)