

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001966**

1. Entity Name

ASPEN RIDGE OF GAINESVILLE LTD.

Principal Place of Business

5700 SW 34TH STREET, SUITE 1307
GAINESVILLE FL 32608

Mailing Address

5700 SW 34TH STREET, SUITE 1307
GAINESVILLE FL 32608

FILED

01 FEB 16 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

20721 SW 46 Ave.

3. Mailing Address

20721 SW 46 Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Newberry, FL

City & State

Newberry, FL

Zip

32669

Country

USA

Zip

32669

Country

USA

4. FEI Number

62-1751602

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, NORITA V
20721 SW 46TH AVENUE
NEWBERRY FL 32669

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.

\$100.00

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 # G72943
NAME EARTHART, INCORPORATED
STREET ADDRESS 5700 SW 34TH STREET, SUITE 1307.
CITY-ST-ZIP GAINESVILLE FL 32608

DOCUMENT #

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STREET ADDRESS

CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Ronnie E. Davis, Pres. of Earthart, Inc.

2/7/01

Date

(352) 472-3952

Daytime Phone #

0000961 AF

CR2E003 (11/00)