

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002179

1. Entity Name

BREWINGHAM DEVELOPERS, LTD.

FILED

00 JAN 14 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

THE WALKER BLDG., SUITE 201
547 N. MONROE ST.
TALLAHASSEE FL 32301

Mailing Address

P.O. BOX 3547
TALLAHASSEE FL 32315-3547

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3536113**
APPLIED FOR

Applied For
Not Applied For

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BREWSTER, JAMES R ATTY.
547 NORTH MONROE STREET, SUITE 203
TALLAHASSEE FL 32301

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.

\$9,200.00

10. Amount of Capital Contributions in FLORIDA to date.

SAME/unchanged **9,200.00**

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 # **L98000001877**
NAME **TIMBERCREEK OF NORTH PENSACOLA, L.C.**
STREET ADDRESS **547 N. MONROE ST., SUITE 201**
CITY - ST - ZIP **TALLAHASSEE FL 32301**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

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STREET ADDRESS

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***158.75 ***158.75

JR

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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Timbercreek of North Pensacola, L.C.
James A. Johnson, Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
ITS: member

01/12/00

Date

850-561-1037

Daytime Phone #

\$158.75