2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002179

1. Entity Name

BREWINGHAM DEVELOPERS, LTD.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
THE WALKER BLDG.. SUITE 201 547 N. MONROE ST. TALLAHASSEE FL 32301	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

DUE BY SEPTEMBER 26, 2001

4. FEI Number 59-3536113 — Applied For / Not Applicable

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
BREWSTER, JAMES R ATTY. 547 NORTH MONROE STREET, SUITE 203 TALLAHASSEE FL 32301	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.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$9,200.00	SAME	

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

Timbercreek of N. Pensacola, L.C.

SIGNATURE: By: SIGNATURE REQUIRED 7/31/01 850-561-1037

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

CR2E003 (5/01)

STAPLE CHECK HERE