2000 UNIFORM BUSINESS REPORT (UBR)

| DOCUI | | 000002198 | | | | | | |
|---|---|--|--|--|--|--|-----------------------------------|--|
| SENECA DEVELOPMENT, LTD. | | | | | FILED 'SECRETARY OF STATE DIVISION OF COMPORATIONS | | | |
| Principal Place of Business 7619 LITTLE ROAD. SUITE 310 NEW PORT RICHEY FL 34654 Mailing Address 7619 LITTLE ROAD. SL NEW PORT RICHEY FL | | | | 6 | 00 APR 19 AM 11: 43 | | | |
| 2. Principal P | lace of Business | 3. Mailing Address | 3. Mailing Address | | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | DO NOT WRITE IN THIS SPACE | | | |
| City & State | | City & State | | 4. FEI Number | 59-3534566 | Applied For Not Applicable | | |
| Zip | Country | Zip | Cour | ntry | 5. Certificate of | Status Desired | \$8.75 Additional Fee Required | |
| | 6. Name and Address of Curre | ent Registered Agent | | Name | 7. Name and A | ddress of New Registered | Agent | |
| GIGLIOTTI, ANTHONY 7619 LITTLE ROAD, SUITE 310 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| NEW POF | RT RICHEY FL 34654 | | City | | | F | Zip Code | |
| 9. Capital Contributions as Shown on record. \$1,000.00 10. Amount of Capital in FLORIDA to date A GENERAL PARTNER THAT IS A BUSINESS ENTI | | | | ontributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. orm; an amendment must be filed to change a general partner. | | | | |
| 12. GENERAL PARTNER INFORMATION | | | | i, an amendin | ADDRESS CHANGES ONLY | | | |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | P98000068930 GENEVA REALTY OF TAMPA BAY, INC. 7619 LITTLE ROAD, SUITE 310 NEW PORT RICHEY FL 34654 | | | REET ADDRESS | | | | |
| DOCUMENT # NAME STREET ADDRESS | | | | MEET ADDRESS | 300003242673 —3 -05/08/0001089018 | | | |
| CITY-ST-ZIP | | | Carr | Y-ST-ZBP | | ****141.25 | ****141.25 | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | | | | Y-ST-ZIP | | | | |
| DOCUMENT# NAME | | | STR | REET ADDRESS | | | | |
| STREET ADDRESS CITY-ST-ZIP | | <u></u> | ст | Y - ST - ZJP | | | | |
| DOCUMENT / NAME | , | | STF | REET ADDRESS | | | | |
| CITY - ST - ZIP | | | cm | Y-ST-ZIP | | | | |
| NAME CTREET ANDRESS | | | STF | REET ADDRESS | | | | |
| CITY+ST-ZIP | | \longrightarrow | <u> </u> | Y-ST-ZIP | 0 | Clastide Cartinos 17 d | aveile, short the information | |
| indicated | certify that the information supplied d on this report is the and accurate ver or trustee empowered to execut | with this filing does not didal and that my algnature shall this report as required by | lity for the exe have the sam Chapter 620, | emption stated in ne legal effect as Florida Statutes | i Section (119.07(3)(i), if made under oath; t | Florida Statutes, Ffurther of hat I am a General Parther | of the limited partnership or | |