

# 2002 UNIFORM BUSINESS REPORT (UBR)

0012883 AT

**DOCUMENT #** A99000000298

**1. Entity Name**  
VINTAGE PROPERTIES XI, LTD.

**FILED**  
02 APR 24 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LF



**Principal Place of Business**  
5752 VINTAGE OAKS CIRCLE  
DELRAY BEACH FL 33484

**Mailing Address**  
5752 VINTAGE OAKS CIRCLE  
DELRAY BEACH FL 33484

**2. Principal Place of Business**

**3. Mailing Address**

**Suite, Apt. #, etc.**

**City & State**

**Zip** **Country**

**DUE BY MAY 1, 2002**

**4. FEI Number** 65-0898256

**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**

COBER CORPORATE AGENTS, INC.  
2601 SOUTH BAYSHORE DRIVE, 19TH FLOOR  
MIAMI FL 33133

**Name** Eugene N. Suttin  
**Street Address (P.O. Box Number is Not Acceptable)**  
5752 Vintage Oaks Cr.  
**City** Delray Beach **FL** **Zip Code** 33484

**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** *Eugene N. Suttin* **DATE** 4/15/02

**9. Capital Contributions as Shown on record.** \$99.00 **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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	M96362	STREET ADDRESS	
NAME	AZA VENTURES II, INC.	CITY-ST-ZIP	
STREET ADDRESS	5752 VINTAGE OAKS CIRCLE		
CITY-ST-ZIP	DELRAY BEACH FL 33484		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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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** *Eugene N. Suttin* **DATE** 4/15/02 **Daytime Phone #** 561-496-7899

CR2E003 (9/01)