

# 2001 UNIFORM BUSINESS REPORT (UBR)

0030363 SP

DOCUMENT # **A99000000580**

1. Entity Name

**ENGINEERED HOMES OF ORLANDO LTD #3**

APPROVED  
AND  
FILED

01 APR 30 AM 11:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**1155 S SEMORAN BLVD  
SUITE 1120  
WINTER PARK FL 32792**

Mailing Address  
**99 LEE ROAD  
SUITE 540  
WINTER PARK FL 32789**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3570649** Applied For  
Not Applicable

Zip Country

Zip Country

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

**STEPHAN, REINHARD G  
2699 LEE ROAD  
SUITE 540  
WINTER PARK FL 32789**

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. (NOT: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. **\$1,000.00**

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 # **P99000032641**  
NAME **E.H. CLERMONT HILLS INC.**  
STREET ADDRESS **1155 S SEMORAN BLVD SUITE 1120**  
CITY-ST-ZIP **WINTER PARK FL 32792**

STREET ADDRESS  
CITY-ST-ZIP **70.00 - 4p  
88.75 - Am**

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CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

STREET ADDRESS **8000004217208**  
CITY-ST-ZIP **-05/15/01--01039--008  
\*\*\*\*158.75 \*\*\*\*158.75**

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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

SIGNATURE:

**IGOR Teplitsky**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

**4-23-01 (407) 678-3939**

CR2E003 (11/00)