

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000000682**

1. Entity Name

**DALTON HOTEL, LTD.**

FILED

00 JAN 24 PM 1:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

715 VASSAR STREET  
ORLANDO FL 32804

Mailing Address

715 VASSAR STREET  
ORLANDO FL 32804-4920

2. Principal Place of Business

720 Rughy St.  
Suite 200

3. Mailing Address

720 Rughy St.  
Suite 200

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3573584

Applied For

Not Applicable

Zip

32804

Country

Zip

32804

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DALTON, ROY B JR.  
715 VASSAR STREET  
ORLANDO FL 32804

7. Name and Address of New Registered Agent

Name Dalton, Roy B. Jr.

Street Address (P.O. Box Number is Not Acceptable)

720 Rughy Street, Ste 200  
Orlando FL 32804

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

1/20/00

9. Capital Contributions  
as Shown on record.

\$4,137,500.00

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

DOCUMENT # P98000034762  
NAME DALTON HOTEL CORP.  
STREET ADDRESS 715 VASSAR STREET  
CITY - ST - ZIP ORLANDO FL 32804

DOCUMENT #  
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STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

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

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/19/00 (407) 425-0921

Date

Daytime Phone #