

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001160**

1. Entity Name

CORAL COVE II, LTD.

FILED

01 JUL 23 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH

Principal Place of Business

**3645 BONITA SPRINGS ROAD #3
BONITA SPRINGS FL 34134**

Mailing Address

**3645 BONITA SPRINGS ROAD #3
BONITA SPRINGS FL 34134**

2. Principal Place of Business

**3645 Bonita Beach Rd
Suite #3**

3. Mailing Address

**3645 Bonita Beach Rd
Suite #3**

DUE BY SEPTEMBER 26, 2001

City & State

**Bonita Springs FL
34134 USA**

City & State

**Bonita Springs FL
34134 USA**

4. FEI Number

59-3586155

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ERDMAN, GREGORY A
3645 BONITA BEACH ROAD #3
BONITA SPRINGS FL 34134**

7. Name and Address of New Registered Agent

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]

Gregory A Erdman Jr.

7-20-01

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.

\$100.00

10. Amount of Capital Contributions
in FLORIDA to date.

5000,000.00

**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 # **P99000062478**
NAME **CORAL COVE II, INC.**
STREET ADDRESS **3645 BONITA BEACH RD #3**
CITY-ST-ZIP **BONITA SPRINGS FL**

DOCUMENT #
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CITY-ST-ZIP

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CITY-ST-ZIP

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

**700004493257--5
-07/24/01--01043--013
***2285.00 ***535.00**

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:

SIGNATURE REQUIRED
[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Gregory A Erdman Jr. 7-20-01 (941) 992-8833

CR2E003 (5/01)

L/0003583 SP

STAPLE CHECK HERE