

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000001521

1. Entity Name

EXIT 40 PROPERTIES, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAY -1 AM 10:33

Principal Place of Business

1834 MAIN STREET  
SARASOTA FL 34236

Mailing Address

1834 MAIN STREET  
SARASOTA FL 34236-5912

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

650952019

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CHANDLER, JAMES R III  
1834 MAIN STREET  
SARASOTA FL 34236

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, 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.

\$550,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$550,000

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 #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
CHANDLER, JAMES R III  
3851 TANGIER TERRACE  
SARASOTA FL 34239

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
FORLENZA, MARC  
108 SUNRISE LANE  
NOKOMIS FL 34275

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
GONZALEZ, RAFAEL  
3185 NOVUS COURT  
SARASOTA FL 34232

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
BONFRERE, NICHOLAS  
7535 CALLE FACIL  
SARASOTA FL 34238

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
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

900003286389--7

06/13/00-01024-004

\*\*\*\*526.25 \*\*\*\*526.25

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
James R Chandler 4/27/00 941 541503

Date

Daytime Phone #

CR2E003 (9/99)