

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0007813 AT

DOCUMENT # A99000001736

1. Entity Name
COURTNEY PARK LIMITED PARTNERSHIP



FILED

03 APR -3 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
100 COLONIAL CENTER PARKWAY, SUITE 470
LAKE MARY FL 32746

Mailing Address
100 COLONIAL CENTER PARKWAY, SUITE 470
LAKE MARY FL 32746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2003

4. FEI Number 59-3607178

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

SCHAFER, JOHN A
250 INTERNATIONAL PARKWAY, SUITE 220
HEATHROW FL 32746

Name

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

100 Colonial Center Pkwy Suite 470

City Lake Mary

FL

Zip Code 32746

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. \$3,615,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$500.00

11. MAKE CHECK PAYABLE TO FL. 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 # P02000045468
NAME COURTNEY PARK DEVELOPMENT II, INC.
STREET ADDRESS 250 INTERNATIONAL PARKWAY, SUITE 220
CITY-ST-ZIP HEATHROW FL 32746

STREET ADDRESS 100 Colonial Center Pkwy Suite 470
CITY-ST-ZIP Lake Mary, FL 32746

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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: *John A. Schaffer* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/31/03

Date

(407) 333-0066

Daytime Phone #

CR2E003 (10/02)