

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 APR -3 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ny 4/13

DO NOT WRITE IN THIS SPACE

DOCUMENT # A99000002237

1. Entity Name  
LAKE UNLIMITED, LTD.

Principal Place of Business Mailing Address  
6529 Southern Blvd.  
West Palm Beach, FL 33413

2. Principal Place of Business Suite, Apt. #, etc.  
Same as above

3. Mailing Address Suite, Apt. #, etc.  
Same as above

City & State

4. FEI Number 65-0970893  
Applied For Not Applicable

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
Geoffrey Peckham  
6529 Southern Blvd.  
West Palm Beach, FL 33413

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. \$350,000

10. Amount of Capital Contributions in FLORIDA to date. \$350,000

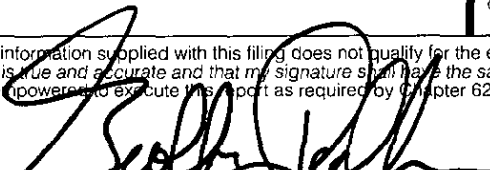
11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

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      |
|                                 | Peckham, Geoffrey | 6529 Southern Blvd. |
|                                 |                   | WPB 33413           |
| DOCUMENT #                      | NAME              | STREET ADDRESS      |
|                                 |                   |                     |
| DOCUMENT #                      | NAME              | STREET ADDRESS      |
|                                 |                   |                     |
| DOCUMENT #                      | NAME              | STREET ADDRESS      |
|                                 |                   |                     |
| DOCUMENT #                      | NAME              | STREET ADDRESS      |
|                                 |                   |                     |
| DOCUMENT #                      | NAME              | STREET ADDRESS      |
|                                 |                   |                     |

| 13. ADDRESS CHANGES ONLY |                       |
|--------------------------|-----------------------|
| STREET ADDRESS           |                       |
| CITY-ST-ZIP              | 300003215009--?       |
|                          | -04/19/00-01089-010   |
|                          | ****526.25 ****526.25 |
| 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 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

3/29/00 561-478-2711  
Date Daytime Phone #

CR2E003 (9/99)