

# 2002 UNIFORM BUSINESS REPORT (UBR)

0016649 AT

**DOCUMENT # B00000000372**

1. Entity Name  
**SPRING LAKE VILLAGE APARTMENTS OF ST. PETERSBURG, LTD.**

FILED

2002 APR 29 AM 10: 53

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**3301 WEST END AVENUE, SUITE 200  
NASHVILLE TN 37203**

Mailing Address  
**3301 WEST END AVENUE, SUITE 200  
NASHVILLE TN 37203**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

**DUE BY MAY 1, 2002**

4. FEI Number **62-1838123**

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

**CARTER, JOHN  
3105 BAY OAKS COURT  
TAMPA FL 33629**

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

9. Capital Contributions as Shown on record. **\$1,540,000.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **M00000002506**  
NAME **SPRING LAKE VILLAGE/ST. PETERSBURG, L.L.C.**  
STREET ADDRESS **3301 WEST END AVENUE, SUITE 200**  
CITY-ST-ZIP **NASHVILLE TN 37203**

STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS **800005509888--5**  
CITY-ST-ZIP **05/15/02--01006--016**  
**\*\*\*\*526.25 \*\*\*\*526.25**

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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

615/279-9200

**SIGNATURE:** **SIG REQUIRED** **Marc Carter Managing Member of GP 4/25/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE