

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B02000000136

1. Entity Name
BALDWIN PARK REALTY, L.P.



Principal Place of Business
1099 BENNETT ROAD
ORLANDO, FL 32803

Mailing Address
1099 BENNETT ROAD
ORLANDO, FL 32803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
32-0541689

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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. 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. **\$0.00**

10. Amount of Capital Contributions
in FLORIDA to date. **\$405,900.00**

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 # **M02000001044**
NAME **BPARK REALTY GP, L.L.C.**
STREET ADDRESS **1099 BENNETT ROAD**
CITY-ST-ZIP **ORLANDO, FL 32803**

STREET ADDRESS

CITY-ST-ZIP

600018563706
06/30/03--01028--005 **1811.60

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

600018563706
05/08/03--01014--010 **464.65

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-30-03

Date

312/920-2400

Daytime Phone #

John Kevin Poorman, Vice President of General Partner

FILED

2003 JUN 30 PM 1:10

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



DUE BY MAY 1, 2003

STAPLE CHECK HERE

CR2E003 (10/02)