

**2003 LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # B02000000289**

1. Entity Name  
**BOARDWALK 13TH, L.P.**



Principal Place of Business  
**2839 PACES FERRY ROAD, SUITE 1170  
ATLANTA GA 30339**

Mailing Address  
**2839 PACES FERRY ROAD, SUITE 1170  
ATLANTA GA 30339**

FILED

03 JUN 12 PM 2:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

**2839 Paces Ferry Rd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 880**

City & State

City & State

**Atlanta, GA**

Zip

Country

Zip

Country

**30339**

**DUE BY MAY 1, 2003**

4. FEI Number

**16-1620502**

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

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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.

**\$1,925,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$1,575,000**

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 # **M02000002293**  
NAME **VININGS INVESTMENT GROUP, LLC**  
STREET ADDRESS **2839 PACES FERRY ROAD, SUITE 1170**  
CITY-ST-ZIP **ATLANTA GA 30339**

STREET ADDRESS **2839 Paces Ferry Road, Suite 880**  
CITY-ST-ZIP **Atlanta, GA 30339**

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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

By: **Vinings Investment Group, LLC, G.P.**

By: **Stephanie Reed**

SIGNATURE:

**STEPHANIE REED**

**4/23/03**

Date

Daytime Phone #

CR2E003 (10/02)

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