

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# B02000000394

FILED  
Apr 08, 2003  
Secretary of State

**Entity Name:** CNL RETIREMENT MA3 SOUTH CAROLINA, LP

**Current Principal Place of Business:**

P.O. BOX 4920  
ORLANDO, FL 328024920

**New Principal Place of Business:**

450 S. ORANGE AVENUE  
ORLANDO, FL 32801

**Current Mailing Address:**

P.O. BOX 4920  
ORLANDO, FL 328024920

**New Mailing Address:**

**FEI Number:** 02-0652571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCARCELLI, LINDA A  
450 S. ORANGE AVENUE  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**Capital Contributions as Shown on record:** 4,950.00

**Amount of Capital Contributions in Florida to date:** 4,950.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: CNL RETIREMENT MA3 GP HOLDING, LLC

Address: 450 S. ORANGE AVE

City-St-Zip: ORLANDO, FL 32801

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: THOMAS J. HUTCHISON, III

P

04/08/2003

Electronic Signature of Signing General Partner

Date