## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # B9300000547

1. Entity Name
ARVIDA GRAND BAY LIMITED PARTNERSHIP-VI



FILED 03 APR 30 AH 5: 36 SECRETARY OF STATE FALL AHASSEE FLORIDA

Principal Plac	e of Business	Mailing Address		TALLAMA		
900 NORTH MICHIGAN AVE.		900 NORTH MICHIGAN AVE., SUITE 2000		11/2	4 د. س	ı
SUITE 900	50511	CHICAGO, IL 60611		191 <i>9</i> 0	HLM :	1
CHICAGO, IL	00011				•	
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2. Principal Place of Business		3. Mailing Address				1
900 N. Michigan Avenue		900 N. Michigan Avenue				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY MAY	1 2003	
Suite 1400 City & State		Suite 1400 City & State			Applied For	劉
Chicago, Illinois		Chicago, Illinois		4. FEI Number 65-0462243	Not Applicable	$\exists$
	Country	Zip	Country	00 0402240	<del></del>	4
Zip	' .	•	-	5. Certificate of Status Desired	S8.75 Additional Fee Required	
60611	USA 6. Name and Address of Current F	60611	USA	7. Name and Address of New Reg		4
<del></del>	6. Name and Address of Current P	egistered Agent	Name	1. Name and Address of Nava Pag	gistered Agent	-
C T CORPORATION SYSTEM		Traine				
1200 SOUTH PINE ISLAND ROAD			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
PLANTATIO	ON, FL 33324					
			City		Zip Code	-
			City		FL Zip Code	-
B. The above	named entity submits this statement for	the purpose of changing its	registered office or reg	istered agent, or both, in the State of Florid	da. I am familiar with, and accept	٦
the obligat	ions of registered agent.	· · ·	•			Ì
						1
SIGNATURE	Signature, typed or printed name of registered agent ar	rd title if applicable.	<u> </u>	Na	DATE	
9. Capital Co	intributions	10. Amount of Capit	al Contributions	MAKE CHECK	PAYABLE TO FL. DEPT OF STATE	<b>F</b>
as Shown	on record. <b>\$211,676.00</b>	in FLORIDA to d	ate. \$204,36		SIDE FOR FEE INFORMATION	Ž.
	A CENEDAL DARTNER TH					
	A GENERAL PARTITION II	1AT IS A BUSINESS EN	ITITY MUST BE REC	GISTERED AND ACTIVE WITH THIS	S OFFICE.	
	NOTE: General Partners MA	/ NOT be changed on ti	he form; an amendi	ment must be filed to change a gen	neral partner.	
12.	NOTE: General Partners MA' GENERAL PARTNER	/ NOT be changed on ti	he form; an amendi	GISTERED AND ACTIVE WITH THIS ment must be filed to change a gen ADDRESS CHAN	neral partner.	- - - - -
12. DOCUMBN3 /	NOTE: General Partners MA  GENERAL PARTNER  F93000001381	/ NOT be changed on the INFORMATION	he form; an amendi	ment must be filed to change a gen	neral partner.	100
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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

Assistant Secretary of Arvida Grand Bay Managers, Inc.

SIGNATURE: AND M ED NAME OF SIGNING GENERAL PARTNER

Karen M. Ewing

04/11/03

(312) 915-1969

STAPLE CHECK HERE