

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # B96000000260

1. Entity Name
TITUSVILLE DEVELOPMENT, L.P. LTD.



FILED

03 APR 16 PM 2:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH



Principal Place of Business
6610 N. SHADELAND AVE., SUITE 200
INDIANAPOLIS IN 46220

Mailing Address
6610 N. SHADELAND AVE., SUITE 200
INDIANAPOLIS IN 46220

2. Principal Place of Business
30 South Meridian Street

3. Mailing Address
30 South Meridian Street

4/16

Suite, Apt. #, etc.
Suite 1100

Suite, Apt. #, etc.
Suite 1100

City & State
Indianapolis, IN

City & State
Indianapolis, IN

Zip
46204

Country
USA

Zip
46204

Country
USA

DUE BY MAY 1, 2003

4. FEI Number 35-1779428

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. \$99.00

10. Amount of Capital Contributions in FLORIDA to date. \$99.00

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 # F96000003496
NAME KITE PROPERTIES, INC.
STREET ADDRESS 6610 N. SHADELAND AVE., SUITE 200
CITY-ST-ZIP INDIANAPOLIS IN 46220

STREET ADDRESS 30 South Meridian Street, Ste 1100
CITY-ST-ZIP Indianapolis, IN 46204

DOCUMENT #
NAME
STREET ADDRESS
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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
F. J. Kite President Kite Properties 4/17/03 (317) 571-5000

Date

Daytime Phone #

CRZE003 (1/0/02)