

2002 UNIFORM BUSINESS REPORT (UBR)

0021260 SP

DOCUMENT # B96000000304

1. Entity Name

AMBASSADOR FLORIDA PARTNERS LIMITED PARTNERSHIP

FILED
02 APR 30 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**2000 S. COLORADO BLVD., TWR 2, STE. 2-1000
 DENVER CO 80222**

Mailing Address

**2000 S. COLORADO BLVD., TWR 2, STE. 2-1000
 DENVER CO 80222**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

Zip

Country

Zip

Country

4. FEI Number

36-4100863

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record.

\$9,900.00

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO 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 # **F96000003977**
 NAME **AMBASSADOR FLORIDA PARTNERS, INC.**
 STREET ADDRESS **2000 S. COLORADO BLVD., TWR 2, STE. 2-1000**
 CITY-ST-ZIP **DENVER CO 80222**

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS
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AR-69.30

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
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 CITY-ST-ZIP

AR SUPP 88.75

STREET ADDRESS
 CITY-ST-ZIP

1.00005392571-4

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STREET ADDRESS
 CITY-ST-ZIP

BK

CR2E003 (9/01)

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

Ambassador Florida Partners Limited Partnership, by its GP, Ambassador Florida Partners, Inc.
SIGNATURE: *By: Chad Asarch*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 Date **4-10-02** Daytime Phone # **303-757-8101**



B960000000304

ACCOUNT NO. : 072100000032

REFERENCE : 554164 5124005

AUTHORIZATION : *Patricia Pujut*

COST LIMIT : \$ 158.05

ORDER DATE : April 29, 2002
 ORDER TIME : 10:53 AM
 ORDER NO. : 554164-045
 CUSTOMER NO: 5124005
 CUSTOMER: Ms. Deborah Hokanson
 Aimco
 2000 South Colorado Blvd.
 Tower Two, Suite 2-1000
 Denver, CO 80222

FILED
 02 APR 30 PM 5: 24
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: AMBASSADOR FLORIDA PARTNERS LIMITED PARTNERSHIP

RECEIVED
 02 APR 30 PM 12: 24
 DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar - Ext. 1124

EXAMINER'S INITIALS:

BK