

# 2000 UNIFORM BUSINESS REPORT (UBR)

0003906 AB

DOCUMENT # B97000000005

1. Entity Name

DOVA OF HOLLYWOOD LIMITED PARTNERSHIP

FILED

01 FEB -9 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

STRATFORD POINT BLDG., FIFTH FLOOR  
110 S. STRATFORD RD.  
WINSTON-SALEM NC 27104

Mailing Address

P. O. BOX 1670  
CLEMMONS NC 27012

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

56-2011822

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BUTT, JEFFREY D ESQ.  
STE. 1000, 201 EAST KENNEDY BLVD.  
TAMPA FL 33602

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.

1035.00

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

\$801,661.00

10. Amount of Capital Contributions  
in FLORIDA to date.

808565

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 # F97000000029  
NAME DOVA OF HOLLYWOOD G.P., INC.  
STREET ADDRESS 6000 MEADOWBROOK MALL, STE. 27  
CITY-ST-ZIP CLEMMONS NC 27012

STREET ADDRESS

CITY-ST-ZIP

500003661375-5  
-12/01/00--01093--012

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

\*\*\*1158.75 \*\*\*347.50  
500003661375-5  
-02/08/01--01046--001  
\*\*\*1087.50 \*\*\*687.50

DOCUMENT #  
NAME  
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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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REINSTATEMENT

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 REQUIRED

11-30-00

336766 5666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DOVA OF HOLLYWOOD, INC. by Don G. Angell, Chairman

Date

Daytime Phone #

CR2E003 (5/00)

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BUTT, JEFFREY D ESQ.  
STE. 1000, 201 EAST KENNEDY BLVD.  
TAMPA FL 33602

Name BUTT, JEFFREY D ESQ.

Street Address (P.O. Box Number is Not Acceptable)  
401 E. JACKSON STREET

27th FLOOR

City TAMPA

FL

Zip Code  
33602

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

JEFFREY D. BUTT

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

(NOTE: Registered Agent signature required, if when retreating)

12/13/00

DATE

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SIGNATURE:

**SIGNATURE REQUIRED**

11-30-00

3367665666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DOVA OF HOLLYWOOD, INC. by Dan G. Angell, Chairman

GP

Daytime Phone #

CH2ED003 (5/00)