

2002 UNIFORM BUSINESS REPORT (UBR)

0005396
AT

LF

DOCUMENT # B97000000523

1. Entity Name

MARINE PARK OF FLAGLER LIMITED PARTNERSHIP

FILED

02 APR 23 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

3343 PEACHTREE ROAD, NE, SUITE 1600
ATLANTA GA 30326

Mailing Address

1000 ABERNATHY ROAD, SUITE 1250
ATLANTA GA 30328

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

58-2344162

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

KNOBLER, IGAL

111 NORTH ORANGE AVE., SUITE 2050
ORLANDO FL 32801

Name

ALBERT J. MADEED

Street Address (P.O. Box Number is Not Acceptable)

4 OCEAN VIEW LANE

City

PAUM CREST

FL

Zip Code

32137

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

Albert J. Madeed

4/10/02

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

DATE

9. Capital Contributions
as Shown on record.

\$1,500,000.00

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 # F97000005160
NAME MARINE PARK G.P., INC.
STREET ADDRESS 1000 ABERNATHY ROAD, SUITE 1800
CITY-ST-ZIP ATLANTA GA 30328

STREET ADDRESS

Suite 1250

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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:

James J. Gentry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

4/10/02

Daytime Phone #

(904) 471-1111

CR2E003 (9/01)