

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
**1250
1000 ABERNATHY ROAD, SUITE 1800
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
**KNOBLER, IGAL
111 NORTH ORANGE AVE., SUITE 2050
ORLANDO FL 32801**

7. Name and Address of New Registered Agent
Name **ALBERT J. MADEED**
Street Address (P.O. Box Number is Not Acceptable)
4 OCEAN VIEW LANE
City **PALM COAST** 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	
DOCUMENT #	F97000005160
NAME	MARINE PARK G.P., INC.
STREET ADDRESS	1000 ABERNATHY ROAD, SUITE 1800
CITY-ST-ZIP	ATLANTA GA 30328
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	suite 1250
CITY-ST-ZIP	
STREET ADDRESS	600005451986
CITY-ST-ZIP	-05/06/02--01013--020 ****526.25 ****526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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* **4/10/02** (904) 471-1111
Signature and typed or printed name of signing general partner. Date Daytime Phone #

CR2E003 (9/01)