

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B980000000052

1. Entity Name

CYPRESS LAKE HOTEL LIMITED PARTNERSHIP

FILED

00 JAN 24 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

ALLIANCE FINANCIAL GROUP, INC  
154 DUNCAN DRIVE  
NORTH ANDOVER MA 01845

Mailing Address

ALLIANCE FINANCIAL GROUP, INC  
154 DUNCAN DRIVE  
NORTH ANDOVER MA 01845-2231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

13217 Ridge Dr

13217 Ridge Dr

City & State

City & State

Rockville MD

Rockville MD

Zip

Country

Zip

Country

20850

USA

20850

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

04-3388943

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.

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.

\$1,641,000.00

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 # F97000004137  
NAME ALLIANCE FINANCIAL GROUP, INC.  
STREET ADDRESS 154 DUNCAN DRIVE  
CITY - ST - ZIP NORTH ANDOVER MA 01845

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT # F96000003417  
NAME RDA INVESTMENTS, INC.  
STREET ADDRESS 13217 RIDGE DRIVE  
CITY - ST - ZIP ROCKVILLE NJ 20850

STREET ADDRESS

CITY - ST - ZIP

13217 Ridge Drive  
Rockville MD 20850

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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*[Signature]*

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

Date

Daytime Phone #

1-17-00 954-255-8008