

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 24, 2000 08:00 AM
Secretary of State

DOCUMENT # **B98000000335**

1. Entity Name
CNL APF PARTNERS, LP

Principal Place of Business
% THE CORP. TRUST CO., CORP. TRUST CENTER
1209 ORANGE STREET
WILMINGTON DE ORLANDO FL
19801 32801

Mailing Address
400 E. SOUTH STREET, SUITE 500
ORLANDO FL
32801

2. Principal Place of Business

3. Mailing Address
450 S. ORANGE AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
ORLANDO FL

Zip Country

Zip Country
32801

4. FEI Number
59-3512195

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BOURNE ROBERT A
400 E. SOUTH STREET, SUITE 500
ORLANDO FL
32801 US

7. Name and Address of New Registered Agent

Name
BOURNE ROBERT A
Street Address (P.O. Box Number is Not Acceptable)
450 S. ORANGE AVENUE
City
ORLANDO FL Zip Code
32801

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 _____ DATE **01/24/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions
as Shown on record. 600,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date. 600,000,000.00

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	CNL APF GP CORP.	400 E. SOUTH ST., SUITE 500	ORLANDO FL 32801
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
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS	450 S. ORANGE AVENUE
CITY-ST-ZIP	ORLANDO FL 32801
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: JOHN T. WALKER, PRESIDENT OF GP

DATE: 01/24/2000