

# 2002 UNIFORM BUSINESS REPORT (UBR)

0006316 AT

DOCUMENT # B98000000382

1. Entity Name

SWAN BUILDING, L.P.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 APR 12 PM 3:32

4/15

Principal Place of Business

3224 PACES BEND COURT  
ATLANTA GA 30327

Mailing Address

3224 PACES BEND COURT  
ATLANTA GA 30327



2. Principal Place of Business

317 Center Street  
Suite, Apt. #, etc.

3. Mailing Address

3224 Paces Bend Court, NW  
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State  
Fernandina Beach, Florida

City & State  
Atlanta, Georgia

4. FEI Number  
58-2395509

Applied For  
Not Applicable

Zip  
32034

Country  
USA

Zip  
30327

Country  
USA

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICES COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

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.

DATE

9. Capital Contributions  
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,000.00

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 # F98000003260  
NAME SWAN BUILDING G.P., INC.  
STREET ADDRESS 3224 PACES BEND COURT  
CITY-ST-ZIP ATLANTA GA 30327

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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:

*Jack Hirsch*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

6/9/02 401/892-9292  
Date Daytime Phone #

CP2E003 (9/01)