

2001 UNIFORM BUSINESS REPORT (UBR)

0020183 SP

DOCUMENT # B99000000417

1. Entity Name

BEACON STATION 22, 23 AND 24 LIMITED PARTNERSHIP

Principal Place of Business

10199 SOUTHSIDE BLVD.
SUITE 108
JACKSONVILLE FL 32256

Mailing Address

10151 DEERWOOD PARK BLVD.
BUILDING 100, SUITE 330
JACKSONVILLE FL 32256

FILED

01 APR 23 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10151 Deerwood Park Blvd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Building 100, Suite 330

City & State

Jacksonville, FL

City & State

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

Zip

Country

4. FEI Number

59-3595038

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HANSON, KARL B III

10151 DEERWOOD PARK BOULEVARD

BUILDING 100, SUITE 330

JACKSONVILLE FL 32256

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$47,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

19,701,265

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 # P99000028602
NAME GCC BEACON 22, 23 & 24, INC.
STREET ADDRESS 1650 PRUDENTIAL DRIVE, SUITE 400
CITY-ST-ZIP JACKSONVILLE FL 32207

DOCUMENT # M99000000653
NAME WEEKS MBS, LLC
STREET ADDRESS 4497 PARK DRIVE
CITY-ST-ZIP NORCROSS GA 30093

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 10151 Deerwood Park Blvd., Bldg 100, Ste 330
CITY-ST-ZIP Jacksonville, FL 32256

STREET ADDRESS
CITY-ST-ZIP
800004162318--4
-05/08/01--01077--025
*****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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Melinda Thompson 4/13/01 904-565-4116

CR2E003 (11/00)