## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9800003037 1. Corporation Name

CNL APF LP CORP.

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90210 022 \*\*\*150.00



_	·									
Principal Place	e of Business	Mailing Address				, , , , , , , , , , , , , , , , , , , ,				
400 E. SOUTH ST., STE, 500 400 E. SOUTH ST., STE, 500									•	
ORLANDO FL 32801 ORLANDO FL 32801						DO NOT WRITE IN THIS SPACE				
						3. Date incorporated or Qualifed				
						05/29/1998				
2 Principal P	lace of Business	2a. Mailing Address			-	4. FEI Number		Apr	olied For	
Z. Principal P	lace of business	26 Walling Address				59-3512196		<del></del>	Applicable	
Suite Ant	# etc	Suite, Apt. #, etc.					\$8		dditional	
						5. Certifcate of Status Desired		ee Re	-	
22						6. Election Campaign Financing	<del></del>		May Be	
—ı `	<b>5</b>	28				Trust Fund Contribution	•	dded to	-	
Zip	Country	Zip	Cou	intry		8. This corporation owes the current ye				
<b>一</b> 、	25	29	30	•		Personal Property Tax.	ΔY		□No	
24 j	9. Name and Address of Current	<del></del>	[30]			10. Name and Address of New Regist	ered Agen	<u> </u>		
	3. Nume and Address of Carrent			81	Name					
BOU	rne, robert a									
	E. SOUTH ST., STE. 500		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)					
	ANDO FL 32801			83	<del></del>					
•										
				84	City		FL 85	Zip C	ode	
		1007 4500 Ft 11- Ot-1				orporation submits this statement for the purpo	· - 1	ing ite	registered	
office or r	egistered agent, or both, in the State om familiar with, and accept the obligat	of Florida. Such change was	authorized	J DV 1	ne corpor	ation's board of directors. I hereby accept the	appointmen	t as rec	gistered	
SIGNATURE			· · · ·			DA CONTRACTOR OF THE CONTRACTO	TE			
40	Signature, typed or printed name of registered agent OFFICERS ANI		13.	Ageni	signature req	puired when reinstating) DA ADDITIONS/CHANGES TO OFFICER		ECTO	RS IN 12	
12.	CD OFFICERS AND	D DELETE	1.1 TI	πε		D/C/CEO		hange	Addition	
TITLE	SENEFF, JAMES M JR.					D/ C/ CLO	_	Ū		
NAME				1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS	l									
CITY-ST-ZIP	ORLANDO FL 32801	☐ DELETE		TY-ST	-ZIP	D/T/VC	D. C.	hange	Addition	
TITLE	CPD		2.1 TI			D/ 1/ VC	LELY V	. idinge	E11	
NAME	BOURNE, ROBERT A		2.2 N							
STREET ADDRESS	I		•		ADDRESS 1					
CITY-ST-ZIP	ORLANDO FL 32801		_	ITY-S	r- ZIP		CN C	hanas	Addition	
TITLE	V	☐ DELETE	3.1 TITLE			P	LANG	hange		
NAME	MCWILLIAMS, CURTIS B		3.2 N	AME						
STREET ADDRESS	•		3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32801			ITY-S	r-ziP		-57			
TITLE	ST	☐ DELETE	4.1 TI	TLE	1	S	<u>[</u> Z] (	hange	☐ Addition	
NAME	ROSE, LYNN E		4.21	AME						
STREET ADDRESS	400 E. SOUTH ST., STE. 500		4.3 S	TREET	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32801			4.4 CITY-ST-ZIP			<del></del> -		- <b>X</b>	
TITLE		☐ DELETE	5.1 TI			EVP		hange	Addition	
NAME			5.2 N	AME		Muller, Charles A.	^			
STREET ADDRESS			5.3 S	TREET	ADDRESS	400 E. South Street #50	υ			
CITY-ST-ZIP			5.4 C	ITY-ST	-ZIP	Orlando, FL 32801				
TITLE		☐ DELETE	6.1 Ti	TLE		EVP		hange	Addition	
NAME			6.2 N	AME		Wall, Jeanne A.				
STREET ADDRESS			6.3 S	TREET	ADDRESS	400 E. South Street #50	0			
CITY OF 710			6.4 C	TY-51	-ZIP	Orlando, FL 32801				

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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR NEWTED NAME OF SIGNING OFFICER OR DIRECTOR

April 7, 1999

407-650-1000

Daytime Phone #

ZEU34 (11/98)