

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVE
AND
FILED

0028894
AF

DOCUMENT # L00000005874

1. Entity Name
CREEKWOOD APARTMENT OWNERS, LLC

01 MAY -1 PM 6:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3100 MONTICELLO, STE 200
DALLAS TX 75205

Mailing Address
3100 MONTICELLO, STE 200
DALLAS TX 75205



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-4122434

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME ☐ Delete
mgrm
Consolidated Capital Properties II
STREET ADDRESS 1775 Broadway, 23rd Floor
CITY-ST-ZIP New York NY 10019

TITLE NAME ☐ Change ☐ Addition
100004271991-01
-05/18/01--01097--020
*****50.00 *****50.00

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TARRAGON REALTY INVESTORS, INC.

SIGNATURE: Kathryn Mansfield, Kathryn Mansfield 4-7-01 214-599-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)