

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0026029
AF

DOCUMENT # M00000000112

1. Entity Name

SMITH PROPERTY HOLDINGS SUNSET POINTE NORTH L.L.

01 MAY -1 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2345 CRYSTAL DRIVE
ARLINGTON VA 22202

2345 CRYSTAL DRIVE
ARLINGTON VA 22202

2. Principal Place of Business

2345 Crystal Drive

3. Mailing Address

2345 Crystal Drive

Suite, Apt. #, etc.

Tenth Floor

Suite, Apt. #, etc.

Tenth Floor

City & State

Arlington, VA

City & State

Arlington, VA

4. FEI Number

54-1681657

Applied For

Not Applicable

Zip

22202

Country

USA

Zip

22202

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

CORPORATION SERVICE 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.

(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

TITLE MGRM ☐ Delete
NAME Charles E. Smith Residential Realty
STREET ADDRESS 2345 Crystal Drive, 10th Floor LP
CITY-ST-ZIP Arlington, VA 22202

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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.

SIGNATURE:

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

Robert D. Zimet, VP of Member 4/30/01 (703) 920-8500

Date

Daytime Phone #

CR2E083 (11/00)



ACCOUNT NO. : 072100000032

REFERENCE : 133854 131022B

AUTHORIZATION :

COST LIMIT : \$ 50.00

ORDER DATE : April 30, 2001

ORDER TIME : 2:14 PM

ORDER NO. : 133854-075

CUSTOMER NO: 131022B

CUSTOMER: Roxanne Brotherton, Legal Asst
Charles E. Smith Companies
2345 Crystal Drive
10th Floor
Arlington, VA 22202

ANNUAL REPORT FILING

NAME: SMITH PROPERTY HOLDINGS SUNSET
POINTE NORTH L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext. 1135

EXAMINER'S INITIALS: _____

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAY - 1 PM 3:24
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING