

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # M99000002088**

1. Entity Name

PARROT'S LANDING INVESTORS LLC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JUL 13 PM 1:25

Principal Place of Business      Mailing Address  
% CONTINENTAL AMERICAN PROPERTIES. LTD.      % CONTINENTAL AMERICAN PROPERTIES. LTD.  
1764 SAN DIEGO AVENUE      1764 SAN DIEGO AVENUE  
SAN DIEGO CA 92110      SAN DIEGO CA 92110

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

33-0882956

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301

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/MANAGERS

10. ADDITIONS/CHANGES

TITLE      Managing Member ☐ Delete  
NAME      Continental American Properties, Ltd  
STREET ADDRESS      1764 San Diego Avenue  
CITY-ST-ZIP      San Diego, CA 92110

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

TITLE      ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE      ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE      ☐ Change ☐ Addition  
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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 REQUIRED**

07/05/00 (619) 297-6771

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

E. Scott Dupree, Vice President for General Partner

CR2E083 (5/00)