

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N41388

FILED
Jun 10, 2002 8:00 AM
Secretary of State

Entity Name: CAPITAL CITY APARTMENT ASSOCIATION, INC.

Current Principal Place of Business:

431 WAVERLY RD.
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY RD.
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-3040056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN L
431 WAVERLY RD.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EVP () Delete
Name: ISAACS, DAN L
Address: 431 WAVERLY RD.
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: WOODWARD, MELL
Address: 1900 CENTER POINTE BLVD OFFICE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DP () Delete
Name: HARRIS, RENEE
Address: 446 CONRADI STE A-103
City-St-Zip: TALLAHASSEE, FL 32304

Title: DT () Delete
Name: DARDEN, PATRICK
Address: 233 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: DVP () Delete
Name: BOONE, MICHAEL
Address: 233 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32301

Title: DVP () Delete
Name: MILLER, BRANDON
Address: 1801 N. MERIDIAN ROAD STE C
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RENDER, MIKE
Address: 313 WILLIAMS STREET
City-St-Zip: TALLAHASSEE, FL 32308

Title: D (X) Change () Addition
Name: EDWARDS, KAY
Address: 1327 HIGH ROAD
City-St-Zip: TALLAHASSEE, FL 32304

Title: DT (X) Change () Addition
Name: MILLER, MICHELLE
Address: 1128 OCALA ROAD
City-St-Zip: TALLAHASSEE, FL 32304

Title: DP (X) Change () Addition
Name: BOONE, MICHAEL
Address: 233 OFFICE PLAZA
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAN ISAACS

EVP

06/10/2002

Electronic Signature of Signing Officer or Director

Date