

192

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A0200001013



1. Entity Name  
**FLAGVENTURE RIVERSIDE, LTD.**

FILED

2003 JUL 23 AM 9:28

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Principal Place of Business  
5000 SAWGRASS VILLAGE CIRCLE, SUITE ONE  
PONTE VEDRA BEACH, FL 32082

Mailing Address  
5000 SAWGRASS VILLAGE CIRCLE, SUITE ONE  
PONTE VEDRA BEACH, FL 32082



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1 2003

City & State

City & State

4. FEI Number

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEBER, BRYAN L  
6000 SAWGRASS VILLAGE CIRCLE, SUITE ONE  
PONTE VEDRA BEACH, FL 32082

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record. **5,750,000**

10. Amount of Capital Contributions  
in FLORIDA to date. **5,250,000**

1. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P02000080782  
NAME FLAGVENTURE RS, INC.  
STREET ADDRESS 5000 SAWGRASS VILLAGE CIRCLE, SUITE ONE  
CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

*Bryan L. Weber, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7-7-03

904-285-0228

Date

Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)

282

**FLAGVENTURE RIVERSIDE, LTD.  
5000 SAWGRASS VILLAGE CIRCLE, SUITE ONE  
PONTE VEDRA BEACH, FLORIDA 32082**

FILED

2003 JUL 23 AM 9:28

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

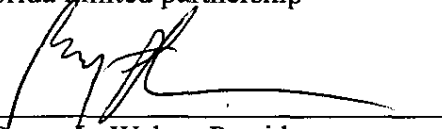
Florida Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: 2003 Uniform Business Report

Dear Madam or Sir:

Please consider our request to waive the \$400 late charge imposed for remitting the supplemental corporate fee after May 1. We did not receive the Uniform Business Report form.

FLAGVENTURE RIVERSIDE, LTD.,  
a Florida limited partnership

By:   
Bryan L. Weber, President  
of General Partner