

# 2002 UNIFORM BUSINESS REPORT (UBR)

0011473 AT

**DOCUMENT # A96000001182**

1. Entity Name  
**PEBB ENTERPRISES PINE ISLAND LTD.**

FILED

02 MAY -6 PM 2:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**1000 CORPORATE DRIVE, SUITE 210  
FORT LAUDERDALE FL 33334**

Mailing Address  
**1000 CORPORATE DRIVE, SUITE 210  
FORT LAUDERDALE FL 33334**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

**DUE BY MAY 1, 2002**

4. FEI Number **65-0675505**  
Applied For  
Not Applicable

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**

**ROSENBERG, JEFFREY M  
1000 CORPORATE DRIVE, SUITE 210  
FORT LAUDERDALE FL 33334**

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

9. Capital Contributions as Shown on record. **\$9,900.00**  
10. Amount of Capital Contributions in FLORIDA to date.  
11. **MAKE CHECK PAYABLE TO 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 # NAME STREET ADDRESS CITY-ST-ZIP	<b>P96000039415 PEBB MANAGEMENT COMPANY, INC. 1000 CORPORATE DRIVE, SUITE 210 FORT LAUDERDALE FL 33334</b>	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	<b>400005597624--1 -05/22/02--01049--002 ****158.05 ****158.05</b>
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CR2E003 (9/01)

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: *J. Rosenberg* **J. ROSENBERG** *4/30/02* **954-771-3305**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #