A0000000035 **DOCUMENT #**

1. Entity Name

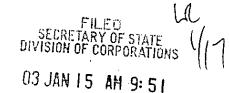
TAMPA FL 33606

Principal Place of Business 611 WEST BAY STREET

HPB PROPERTIES PARTNERS, LTD.



Mailing Address 611 WEST BAY STREET TAMPA FL 33606



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2. Principal	Place of Business	3.	Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.		<u> </u>	DUE BY MAY 1, 2003		
City & State			City & State Zip Country		···	4. FE! Number 59-3616018 Applied For		
Zip	Country				Not Applicat	ıle		
,			· ·	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	\dashv	
SHIMBERG, SCOTT				Na Na	Name			
611 WEST BAY STREET				St	Street Address (P.O. Box Number is Not Acceptable)			
TAMPA FL 33606				ļ	 		\dashv	
				Cit		FL Zip Code	٦	
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 regist	ered agent and title	if applicable.			DATE	1	
9. Capital Contributions as Shown on record. \$500,000.00			10. Amount of Capital Contributions		set do	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE	\dashv	
as on own our record. in FLORIDA to d					# O	SEE BEVERSE SIDE FOR FEE INFORMATION	<u>.</u> .	
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.	J86922 HYDE PARK BUILDERS, INC.			13.		ADDRESS CHANGES ONLY	\dashv	
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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: