

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A0000000552

1. Entity Name

OS PRIME-I, LIMITED PARTNERSHIP

Principal Place of Business Mailing Address

2202 NORTH WESTSHORE BLVD.. 5TH FLOOR  
TAMPA FL 33606 2202 NORTH WESTSHORE BLVD.. 5TH FLOOR  
TAMPA FL 33606

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 **59-3634314**  Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

BRAUN, KELLY M  
2202 NORTH WESTSHORE BLVD., 5TH FLOOR  
TAMPA FL 33606

## 7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. **\$0.00** 10. Amount of Capital Contributions in FLORIDA to date. **250,000** <sup>00</sup> 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 #	P99000078837	STREET ADDRESS	
NAME	OS PRIME, INC.	CITY-ST-ZIP	
STREET ADDRESS	2202 NORTH WESTSHORE BLVD., 5TH FLOOR	STREET ADDRESS	000004487070-7
CITY-ST-ZIP	TAMPA FL 33606	CITY-ST-ZIP	-07/20/01--01004-005
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