

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A00000000560**

1. Entity Name

TURNBERRY WOODS AT THE STRAND LIMITED PARTNERSHIP

FILED

02 MAR 22 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**4771 ALBERTON COURT, #3502
NAPLES FL 34105**

Mailing Address

**4771 ALBERTON COURT, #3502
NAPLES FL 34105**



2. Principal Place of Business

4770 Alberton Court

3. Mailing Address

4770 Alberton Court

Suite, Apt. #, etc.

#2602

Suite, Apt. #, etc.

#2602

DUE BY MAY 1, 2002

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

59-3635503

Applied For

Not Applicable

Zip

34105

Country

U.S.A.

Zip

34105

Country

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BATEMAN & MARTIN DEVELOPMENTS, INC.
4771 ALBERTON COURT, #3502
NAPLES FL 34105**

7. Name and Address of New Registered Agent

Name
Bateman & Martin Developments, Inc.

Street Address (P.O. Box Number is Not Acceptable)

4770 Alberton Court, #2602

City
Naples

FL

Zip Code
34105

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.

3/20/02
DATE

9. Capital Contributions
as Shown on record.

\$600,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$600,000.00

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

DOCUMENT # **P98000101421**
NAME **BATEMAN & MARTIN DEVELOPMENTS, INC.**
STREET ADDRESS **4771 ALBERTON COURT, #3502**
CITY-ST-ZIP **NAPLES FL 34105**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

4770 Alberton Court, #2602

CITY-ST-ZIP

Naples, FL 34105

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

200005180862--2
-04/01/02--01093--006
*******526.25 *****526.25**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/20/02
Date

(239) 430-1012
Daytime Phone #

CR2E003 (9/01)