LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000941

1. Entity Name

MCCALL'S BEACH CASTLE GULFSIDE, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 APR -8 AM 11:27

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5310 GULF OF MEXICO DR.	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LONGBOAT KEY	City & State
Zip: FL / Country: 34228	Zip / Country

DUE BY MAY 1

4. FEI Number: 65-1023681 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: RIC GREGORIA, ESQ.

Street Address (P.O. Box Number is Not Acceptable): 200 S. ORANGE AVE.

City: SARASOTA FL Zip Code: 34236

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

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$1,410,000.00		

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 #	P00000055932
NAME	McCall's Beach Castle Gulfside Corp
STREET ADDRESS	5310 Gulf of Mexico Dr
CITY-ST-ZIP	Longboat Key, FL 34228
DOCUMENT #	
NAME	
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STREET ADDRESS	04/08/03--01005--002 **525.25
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CR2E003B (12/02)

STAPLE CHECK HERE

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: Jean McCall JEAN McCALL 04/03/03 941.355.7420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #