

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A01000001607
1. Entity Name

CASTO-RIVER CLUB VENTURE, LTD.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
401 N. CATTLEMEN ROAD

Suite, Apt. #, etc.
SUITE 108

City & State
SARASOTA, FL

Zip Country
34232 USA

3. Mailing Address
209 EAST STATE STREET

Suite, Apt. #, etc.

City & State
COLUMBUS, OH

Zip Country
43215 USA

FILED
02 APR 30 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number
30-0013185

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name
ROBERT F. GREENE, ESQ

Street Address (P.O. Box Number is Not Acceptable)
1301 SIXTH AVEN. W. SUITE 400 N

City State Zip Code
BRADENTON FL 34205

**DO NOT WRITE
IN THIS SPACE**

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.

DATE _____

9. Capital Contributions
as Shown on record. \$100

10. Amount of Capital Contributions
in FLORIDA to date. \$100

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 # P01000107963
NAME CASTO RIVER CLUB CORPORATION
STREET ADDRESS 209 EAST STATE STREET
CITY-ST-ZIP COLUMBUS, OH 43215

STREET ADDRESS

CITY-ST-ZIP

900005509819--9
-05/14/02--01077--020
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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: _____

DON M. CASTO, III

APRIL 24, 2002 614-228-5331

CR2E003B (12/01)