

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0007883  
AT

DOCUMENT # A04410

1. Entity Name  
SES GROUP HARBOUR PARK, LTD.



FILED  
03 MAY -9 AM 10:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
360 S. WYMORE ROAD  
ALTAMONTE SPRINGS FL 32714

Mailing Address  
360 S. WYMORE ROAD  
ALTAMONTE SPRINGS FL 32714

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 59-1651439

Applied For  
Not Applicable

Zip

Country

Zip

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

MCKEEVER, PATRICIA  
360 S. WYMORE ROAD  
ALTAMONTE SPRINGS FL 32714

Name  
William F. Crowley, Jr.  
Street Address (P.O. Box Number is Not Acceptable)  
360 S. Wymore Road  
Altamonte Springs, FL 32714  
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE William F. Crowley, Jr. 04/23/03  
Signature typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions  
as Shown on record. \$16,700.00

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #  
NAME REESER, DENNIS I  
STREET ADDRESS 253 HAMPDEN PLACE  
CITY-ST-ZIP WINTER PARK FL

STREET ADDRESS  
CITY-ST-ZIP 800018686708  
06/13/03--01070--004 \*\*46.90

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP 800018686708  
05/09/03--01111--011 \*\*158.75

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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: DENNIS I. REESER 04/23/03 (407) 774-1336  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)