2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A07020 1. Entity Name THE BEACHES HAMLET, LTD.						03:	FILED SEP 15 PM 12: 48
Principal Plac 1600 SHETTER IACKSONVILLE	AVE.		Mailing Address 1600 SHETTER AVE. JACKSONVILLE BEACH FL 32250		SEC; TALLA	NETARY OF SHEET A	
2. Principal Place of Business PO Box 795			3. Mailing Address P.O.Box 795			T SOURCH TOUR BEIGH FOOM COME WHEN COME COME STAN CHAIL ONDER DUCK JOHN	
Suite, Apt. #, etc. Suite, Apt. #, etc.						DUE BY SEPTEN	IBER 24, 2003
City & Stat	ton.	Fe	City & State Ellenton	F	î.	4. FEI Number 59-1947463	Applied For Not Applicable
Zip ユラデン	22	Country	34222	Cour	ntry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
į.	6. Name	and Address of Current	Registered Agent		Name	7. Name and Address of New Regi	stered Agent
WEAR, J R 1600 SHETTER AVE. JACKSONVILLE BEACH FL 32250					Name Street Address (P.O. Box Number is Not Acceptable)		
					1301 10 th St. East, Ste B City Palmetto FL Zip Code 34221		
	ions of regist			register		ed agent, or both, in the State of Florida	
9. Capital Co as Shown		\$632 175.00	10. Amount of Capit in FLORIDA to d		butions 632,775	- · · · · · · · · · · · · · · · · · · ·	AYABLE TO FL. DEPT. OF STATE LIDE FOR FEE INFORMATION
	NOTE	GENERAL PARTNER 1 : General Partners M/	THAT IS A BUSINESS EN AY NOT be changed on t	ITITY M	UST BE REGIST	TERED AND ACTIVE WITH THIS Out that the second in the second is the second in the seco	OFFICE.
12.		GENERAL PARTNE		13.		ADDRESS CHANG	
DOCUMENT # NAME STREET ADDRESS	HOLT, EDWARD 1093 W. 6TH ST.			STRI	EET ADDRESS		
CITY-ST-ZIP	JACKSON			CITY	-ST-ZIP		
DOCUMENT # NAME	COOPER,	ARLENE M	,		EET ADDRESS	ti, ee eel ee eti, eti eel ewe d	, and an investigation
STREET ADDRESS CITY-ST-ZIP	1600 SHE JACKSON	TTER AVENUE VILLE FL		СІТҮ	-si-Fili	09/15/03 01033 0	07 00005.00
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Description Phone #

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

P.O. Box 795 Ellenton, FL. 34222-0795 03 SEP 15 PM 12: 48

TAEBAHASSEE, FLORIDA

September 11, 2003

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL. 32314

Re: Beaches Hamlet, Ltd. Document # A07020 FEIN 59-1947463

To Whom It May Concern:

As the Liquidating Trustee for the referenced Limited Partnership, I am requesting a waiver of the late charge for the current filing period for the following reasons:

- . 1. The property sold last year and is involved in continuing litigation;
 - 2. The address the form was sent to was the physical location of the property and I only received the attached form for filing.
 - 3. To avoid any future conflicts, I have changed the mailing address, the principal place of business address and the mailing address for the registered agent, which also is my office address.

I am enclosing the required registration fee including a Certificate of Status less the late filing fee, our check #1700 in the amount of \$535.00 and request your acceptance due to the unusual and extenuating circumstances involved.

Thank you for your consideration.

Sincerely,

J.R. Wear

Liquidating Trustee