

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A08239**

1. Entity Name

PALM ISLAND PARTNERS, LTD.

FILED
May 02, 2000 8:00 am
Secretary of State

Principal Place of Business

**12800 UNIVERSITY DR.
#260
FORT MYERS FL 33907**

Mailing Address

**12800 UNIVERSITY DR.
#260
FORT MYERS FL 33907-5335**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1962260**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MARINER GROUP, INC.
12800 UNIVERSITY DR.,
SUITE 350
FORT MYERS FL 33919**

7. Name and Address of New Registered Agent

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$851,368.00

10. Amount of Capital Contributions in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**BECKSTEAD, GARFIELD R
7092 PLACIDA ROAD
CAPE HAZE FL**

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**384829
MARINER PROPERTIES, INC
12800 UNIVERSITY DR #350
FT. MYERS FL**

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
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STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP

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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 REQUIRED

Allen G. Ten Broek

4/26/00

(941) 481-2011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mariner Properties, Inc.

Daytime Phone #

CR 1000 (5/99)