200	2 UNI	FORM BUS	INESS REPO)RT ((UBR	?)		APPR		
DOCUMENT # A10922 1. Entity Name HILTON PINE ISLAND LIMITED PARTNERSHIP							AND FILED 02 APR 26 PM 1: 30			
Principal Place of Business 1505 SE 40TH ST. CAPE CORAL FL 33904			Mailing Address 1505 SE 40TH ST. CAPE CORAL FL 33904							
2 Principal 6	Disco of Busin		The Administration							
931 Cape Coral Pkwy E.			3. Mailing Address 931 Cape Cora	931 Cape Coral Pkwy E.			1 0016 11	1607 (1011 00 11 0 10 14 0 111	11 0 1101 0 1021 010	11 A1012 B1011 D1011 OLDE 1002
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DUE BY MAY 1, 2002			
City & State			City & State	•			4. FEI Number	59-2151790	<u> </u>	Applied For
Zip	Cape Coral, Florida Zip Country		Cape Coral,Florid			E Contification				Not Applicable 8.75 Additional
33904	33904 USA 6. Name and Address of Current I		33904	USA				of Status Desired Address of New R	L F	ee Required
	O. (Valino	and Address of Current	neglatered Agent		Name			Address of New H	egistered Ag	gent
FISHER, I				-			L Greene O. Box Number	is Not Acceptable)	
	40TH ST.	20.4		-	93	31 Ca	pe Coral	is Not Acceptable Parkway E	₹	
CAPE CO)ral fl 339	904								
						_	oral	a:	FL	² 33964
8. The above	named entity	submits this statement for	the purpose of changing its	registered	d office or re	egistere	d agent, or both	, in the State of Flo	rida.	
SIGNATURE .	Signature, typed	or printed name of registered agent a	nd title if applicable.	niel	Greene	e,Pre	es.	22 Apr	il 2002	2
9. Capital Contributions as Shown on record. \$118,000.00 in FLORIDA to date									DATE	
		\$118,000.00			utions			11. MAKE CHEC	DATE K PAYABLE	TO DEPT. OF STATE FEE INFORMATION
	on record.	ENERAL PARTNER T	in FLORIDA to de	ate.	IST BE BI	EGISTI	ERED AND AC	11. MAKE CHEC SEE REVERS	K PAYABLE T SE SIDE FOR	FEE INFORMATION
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SIGNATURE: _

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

22 April 2002

(239) 542-3189