

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A14432**

1. Entity Name

HAWK'S CAY INVESTORS, LTD.

FILED

02 FEB 19 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

150 EAST SAMPLE ROAD
SUITE 200
POMPAHO BEACH FL 33064

Mailing Address

1200 N. FEDERAL HWY., SUITE 200
BOCA RATON FL 33432



2. Principal Place of Business

1200 N. FEDERAL HWY.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 200

City & State

BOCA RATON, FL

City & State

Zip

Country

33432

4. FEI Number

59-2295281

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, DONALD H

1200 N. FEDERAL HWY, STE 200

BOCA RATON FL 33432

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.

DATE

9. Capital Contributions
as Shown on record.

\$25,938,247.00

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

DOCUMENT # **G35924**
NAME **HAWK'S CAY MANAGEMENT, INC.**
STREET ADDRESS **150 E. SAMPLE RD., #200**
CITY-ST-ZIP **POMPAHO BEACH FL**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

400005021994--4

-02/26/02--01078--004

****535.00 ****535.00

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

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:

Donald H. Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/1/02
Date

561-447-8272
Daytime Phone #

CR2E003 (9/01)

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