

2002 UNIFORM BUSINESS REPORT (UBR)

00050555 AV

DOCUMENT # **A22809**

1. Entity Name

BOCA HAMPTONS PLAZA GROUP, LTD.

Principal Place of Business

**GARDENS CORPORATE CENTER
3801 PGA BOULEVARD, SUITE 555
WEST PALM BEACH FL 33401**

Mailing Address

**GARDENS CORPORATE CENTER
3801 PGA BOULEVARD, SUITE 555
WEST PALM BEACH FL 33401**

FILED

LF

02 APR 23 AM 9:11

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



2. Principal Place of Business

3. Mailing Address

**3801 PGA Boulevard
Suite 600
Palm Beach Gardens, FL 33410**

**3801 PGA Boulevard
Suite 600
Palm Beach Gardens, FL 33410**

DUE BY MAY 1, 2002

4. FEI Number

59-2717239

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**REGSERV CORP
GARDENS CORPORATE CENTER
3801 PGA BOULEVARD, SUITE 555
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent

**REGSERV CORP.
3801 PGA Boulevard
Suite 600
Palm Beach Gardens, FL 33410**

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.

\$2,024,300.00

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 # **H42691**
NAME **D.A. SANDS & COMPANY**
STREET ADDRESS **3801 PGA BOULEVARD, SUITE 600**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

STREET ADDRESS

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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 629, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

561-630-5055

CR2E003 (9/01)