

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A25706**

1. Entity Name
N.S.I. VENTURE FUND I, LTD.

FILED

02 MAY -1 AM 10:14

Principal Place of Business
**3040 GULF TO BAY BLVD., #205
CLEARWATER FL 33759**

Mailing Address
**3040 GULF TO BAY BLVD., #205
CLEARWATER FL 33759**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

**5215 S. Westshore Blvd.
#29
Tampa, FL 33611**

**5215 S. Westshore Blvd.
#29
Tampa, FL 33611**

DUE BY MAY 1, 2002

4. FEI Number **38-2793319**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**POSTON, WILLIAM G
C/O NSI MANAGEMENT, INC.
3040 GULF TO BAY BLVD, #205
CLEARWATER FL 33759**

Name

**5215 S. Westshore Blvd.
#29
Tampa, FL 33611**

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. **\$540,400.00**

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 **O'NEILL, PATRICK J.**
STREET ADDRESS **26657 WOODWARD AVE., STE. 100**
CITY-ST-ZIP **HUNTINGTON WOODS MI 48070**

STREET ADDRESS

CITY-ST-ZIP

800005481318--5

-05/01/02--01069--013

DOCUMENT #
NAME **O'NEILL, EDWARD J.**
STREET ADDRESS **26657 WOODWARD AVE., STE. 100**
CITY-ST-ZIP **HUNTINGTON WOODS MI 48070**

STREET ADDRESS

CITY-ST-ZIP

******578.75 ****526.25**

DOCUMENT #
NAME **SIMONS, TED A.**
STREET ADDRESS **26657 WOODWARD AVE., STE. 100**
CITY-ST-ZIP **HUNTINGTON WOODS MI 48070**

STREET ADDRESS

CITY-ST-ZIP

FF \$526.25

DOCUMENT #
NAME **P13599**
STREET ADDRESS **NORTHERN SALINE, INC.**
CITY-ST-ZIP **26657 WOODWARD AVE., STE. 100
HUNTINGTON WOODS MI 48070**

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

PATRICK J. O'NEILL

4/10/2002

Date

Daytime Phone #

813-837-6779

CR2E003 (9/01)

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