

**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A32996

1. Entity Name
CANEEL BAY, LTD.



Principal Place of Business
**4440 PGA BLVD., SUITE 402
PALM BEACH GARDENS FL 33410**

Mailing Address
**1 RICHMOND SQUARE, SUITE #100C
PROVIDENCE RI 02906**

FILED
Feb 24, 2003 8:00 A.M.
Secretary of State



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number **65-0334452**

Applied For

Not Applicable

Country

Zip

Country

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

**SCHEIN, HAROLD I.
C/O WOLLETT & ASSOCIATES, P.A.
4440 PGA BLVD., SUITE 402
PALM BEACH GARDENS FL 33410**

Name
Harold I. Schein

Street Address (P.O. Box Number is Not Acceptable)
Frenchman's Creek

13844 Le Bateau Isle

City
Palm Beach Gardens,

FL

Zip Code
33410

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. I am familiar with, and accept the obligations of registered agent.

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

1/16/03
DATE

9. Capital Contributions
as Shown on record. **\$7,500.00**

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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
**SCHEIN, HAROLD I
4440 PGA BLVD STE 402
PALM BEACH GARDENS FL**

STREET ADDRESS
13844 Le Bateau Isle
CITY-ST-ZIP
Palm Beach Gardens, FL 33410

DOCUMENT #
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CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
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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: **Harold I. Schein**

1/14/03 (401) 521-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)