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

DOCL	JMENT#	<b>A</b> 9	3000	0000	784

1. Entity Name

CITY-ST-ZIP

PELICAN ISLE YACHT CLUB PARTNERS, LTD.



FILED 03 APR 21 PM 2: 16 Principal Place of Business Mailing Address 601 BAYSHORE BOULEVARD, SUITE 960 601 BAYSHORE BOULEVARD, SUITE 960 TARBELARY OF STEEL TAMPA FL 33606 TAMPA FL 33606 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** 4. FEI Number 59-3193580 City & State Applied For City & State Not Applicable Zíp Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Randolph J. Wolfe OELSCHLAEGER, EDWARD R Street Address (P.O. Box Number is Not Acceptable)
100 N. Tampa St. Ste 2700 601 BAYSHORE BOULEVARD, SUITE 960 TAMPA FL 33606 City Tampa Zip Code 33602 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. wish J. Wise SIGNATURE typed or printed came of registeres agent and title if applicable. 9. Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 10. Amount of Capital Contributions \$3,576,896.00 as Shown on record. in FLORIDA to date. 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 ADDRESS CHANGES ONLY CR2E003 (10/02) A93000000776 DOCUMENT # STREET ADDRESS PELICAN ISLE YACHT CLUB ASSOCIATES, LTD. NAME 601 BAYSHORE BOULEVARD, SUITE 960 STREET ADDRESS CITY-ST-ZIP 400016398024 04/21/03=-01066=-006 TAMPA FL 33606 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

3/18/03/813-251-4868 URÆdward R. Oelschlaeger SIGNATURE:

CITY-ST-ZIP

14. 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