

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000000023**

1. Entity Name

OCEAN GROVE ASSOCIATES, LTD.

Principal Place of Business

2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
MIAMI FL 33133

Mailing Address

2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR
MIAMI FL 33133-5412

FILED

00 MAY 22 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

55 Tozer Road

Suite, Apt. #, etc.

3. Mailing Address

55 Tozer Road

Suite, Apt. #, etc.

City & State

Beverly, Massachusetts

City & State

Beverly, Massachusetts

4. FEI Number

65-0545055

Applied For

Not Applicable

Zip

01915

Country

USA

Zip

01915

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOLDMAN, JOEL K

2601 SOUTH BAYSHORE DRIVE, 9TH FLOOR

MIAMI FL 33133

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$4,300,000.00

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 #
NAME Brookwood Ocean Grande Management
STREET ADDRESS Co., LLC
CITY-ST-ZIP 55 Tozer Road
Beverly, Massachusetts 01915

By Amendment filed: March 2, 2000

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

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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

Brookwood Ocean Grande Management Co., LLC, General Partner

SIGNATURE: By: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Thomas N. Trkla, Manager

Daytime Phone #

CF2ECX (1/00)