

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0012098 AT

**DOCUMENT # A95000000580**

1. Entity Name  
**SEASONS OF TAMPA BAY, LTD.**



**FILED**

03 APR 21 PM 1:53



Principal Place of Business  
**9900 GRAND VERDE WAY  
BOCA RATON FL 33428**

Mailing Address  
**9900 GRAND VERDE WAY  
BOCA RATON FL 33428**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
**17529 Middle Brook Way**  
Suite, Apt. #, etc.  
City & State  
**BOCA RATON, FL**  
Zip Country  
**33496 USA**

**DUE BY MAY 1, 2003**

4. FEI Number **59-3308563** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**GRASSANO, ALAN R  
9900 GRAND VERDE WAY  
BOCA RATON FL 33428**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
**17529 MIDDLE BROOK WAY**  
City **BOCA RATON** FL Zip Code **33496**

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]* DATE **3-17-03**

9. Capital Contributions as Shown on record. **\$300,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **100,000**

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

DOCUMENT #	<b>S07745</b>
NAME	<b>GRASSANO ASSOCIATES, INC.</b>
STREET ADDRESS	<b>9900 GRAND VERDE WAY</b>
CITY-ST-ZIP	<b>BOCA RATON FL 33428</b>
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	<b>17529 MIDDLE BROOK WAY</b>
CITY-ST-ZIP	<b>BOCA RATON, FL 33496</b>
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

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** DATE: **3-17-03** DAYTIME PHONE #: **561-218 0238**

CR2E003 (10/02)