

2001 UNIFORM BUSINESS REPORT (UBR)

0016773 AF

DOCUMENT # **A95000000581**

1. Entity Name

PAGE W, LTD.

FILED

01 FEB -5 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

3848 W. MADURA RD.
GULF BREEZE FL 32561

3848 W. MADURA RD.
GULF BREEZE FL 32561

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4340 Hickory Shores Blvd.

4340 Hickory Shores Blvd.

City & State

City & State

GULF BREEZE FL.

GULF BREEZE FL.

Zip

Country

Zip

Country

32561

SANTA ROSA

32561

SANTA ROSA

4. FEI Number

59-3328647

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

WARD, RONALD E
3848 W. MADURA RD.
GULF BREEZE FL 32561

Name

Street Address (P.O. Box Number is Not Acceptable)

4340 Hickory Shores Blvd.

City

FL

Zip Code 32561

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 *Ronald Ward* RONALD WARD

30 Jan. 2001

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.

\$500.00

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 WARD, RONALD E
STREET ADDRESS 3848 W. MADURA RD.
CITY-ST-ZIP GULF BREEZE FL 32561

STREET ADDRESS 4340 Hickory Shores Blvd.
CITY-ST-ZIP GULF BREEZE, FL. 32561

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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:

Ronald Ward RONALD WARD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

30 Jan. 2001 850 934 8911

Date

Daytime Phone #

CR2E003 (11/00)