

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A95000000607

1. Entity Name
PERROS GRANDE LIMITED



FILED

03 APR 29 PM 12:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MM

Principal Place of Business
455 INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770

Mailing Address
455 INDIAN ROCKS ROAD
BELLEAIR BLUFFS FL 33770



2. Principal Place of Business
10225 ULMERTON Rd.

3. Mailing Address
10225 ULMERTON Rd.

Suite, Apt. #, etc.
Suite 3D

Suite, Apt. #, etc.
Suite 3D

City & State
Largo, FL

City & State
Largo, FL

Zip
33771

Country
USA

Zip
33771

Country
USA

4. FEI Number 59-3333256

Applied For
Not Applicable

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

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

ARSENAULT & REARDON, P.A.
10225 ULMERTON ROAD, SUITE 2
LARGO FL 33771

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

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

DATE

9. Capital Contributions as Shown on record. \$3,700,000.00

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

DOCUMENT # P95000029218
NAME PERROS GRANDE, INC.
STREET ADDRESS 455 INDIAN ROCKS ROAD NORTH
CITY-ST-ZIP BELLEAIR BLUFFS FL 33770

13. ADDRESS CHANGES ONLY

STREET ADDRESS 10225 ULMERTON Rd., #3D
CITY-ST-ZIP Largo, FL 33771

DOCUMENT #
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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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/17/03
Date

Daytime Phone #

0021275 FP

CR2E003 (10/02)