

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0006443
AT

DOCUMENT # **A95000001151**

1. Entity Name

OLD PONTE VEDRA MARSHSIDE, LTD.

02 FEB 22 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**7865 SOUTHSIDE BLVD.
JACKSONVILLE FL 32256**

Mailing Address

**7865 SOUTHSIDE BLVD.
JACKSONVILLE FL 32256**



2. Principal Place of Business

4141 Southpoint Dr. E

3. Mailing Address

4141 Southpoint Dr. E

Suite, Apt. #, etc.

Ste B

Suite, Apt. #, etc.

Ste B

City & State

Jacksonville, FL 32216

City & State

Jacksonville, FL 32216

DUE BY MAY 1, 2002

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

4. FEI Number

59-3329342

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

**SILVERFIELD, GARY D
7865 SOUTHSIDE BLVD.
JACKSONVILLE FL 32256**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number, if applicable)

4141 Southpoint Dr. E

Ste B

City

Jacksonville, FL 32216

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.

DATE

9. Capital Contributions
as Shown on record.

\$120,000.00

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 # **H97238**
NAME **C. ATKERSON, INC.**
STREET ADDRESS **9471 BAYMEADOWS ROAD, SUITE 403**
CITY-ST-ZIP **JACKSONVILLE FL 32256**

DOCUMENT # **S04135**
NAME **SILVERFIELD DEVELOPMENT COMPANY**
STREET ADDRESS **7865 SOUTHSIDE BLVD.**
CITY-ST-ZIP **JACKSONVILLE FL 32256**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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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

**4141 Southpoint Dr. E
Ste B
Jacksonville, FL 32216**

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****526.25 ****526.25**

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:

Gary D. Silverfield
Gary D. Silverfield

2/18/02

904-332-7099

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)