

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUN 10 PM 12:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A95000001924**

1. Entity Name
K2 DEVELOPMENT, LTD.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5021 W. Laurel Street

Suite, Apt. #, etc.
Suite 200

City & State
Tampa, FL

Zip
33607

Country
U.S.A.

3. Mailing Address
5021 W. Laurel Street

Suite, Apt. #, etc.
Suite 200

City & State
Tampa, FL

Zip
33607

Country
U.S.A.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number
59-3350383

Applied For
Not Applicable

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

7. Name and Address of Current Registered Agent

Name
Stephen B. Kelly

Street Address (P.O. Box Number is Not Acceptable)
5021 W. Laurel Street

Suite 200

City
Tampa

FL Zip Code
33607

**DO NOT WRITE
IN THIS SPACE**

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. **\$990.00**

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 # **A950000089531**
NAME
K2 Development, Inc.
STREET ADDRESS
5021 W. Laurel Street, Suite 200
CITY-ST-ZIP
Tampa, FL 33607

STREET ADDRESS
5021 W. Laurel Street, Suite 200

CITY-ST-ZIP
Tampa, FL 33607

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
100005763791--9
CITY-ST-ZIP
-06/12/02-01076--002
******141.25 ****141.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

DOCUMENT #
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NAME
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:

Stephen B. Kelly

5 June 2002

813 495 7675

STAPLE CHECK HERE

CR2E003B (12/01)