## **2003 LIMITED PARTNERSHIP** UNIFORM BUSINESS REPORT (UBR

## A95000002061 **DOCUMENT #**

1. Entity Name

BRIAN'S PLACE DEVELOPMENT, LTD.



FILED

DIVISION OF CORPORATIONS 03 JAN 15 AM 10: 38 Principal Place of Business Mailing Address 6650 W. INDIANTOWN RD., STE. #200 6650 W. INDIANTOWN RD., STE. #200 JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc **DUE BY MAY 1, 2003** City & State City & State 4. FEI Number 65-0647287 Applied For Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCOTT KRAMER, ESQUIRE 6650 W. INDIANTOWN RD., STE. #200 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33458 City 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 9. Capital Contributions 10. Amount of Capital Contributions \$495,000.00 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE as Shown on record. in FLORIDA to date. 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 ADDRESS CHANGES ONLY P98000069875 **DOCUMENT #** STREET ADDRESS NAME 6650 GENERAL, INC. 6650 WEST INDIANTOWN ROAD, #200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL 33458 DOCUMENT # 200010140242 STREET ADDRESS NAME N1/15/03---01094---002 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT 4 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT #** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

CR2E003 (10/02)