


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

004558 AV

DOCUMENT # A96000000105

1. Entity Name
HOPS OF BOWLING GREEN, LTD.



FILED

03 MAY 28 AM 8 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O HOPS GRILL & BAR, INC.
2701 N. ROCKY POINT DR., SUITE 300
TAMPA FL 33607

Mailing Address
C/O HOPS GRILL & BAR, INC.
2701 N. ROCKY POINT DR., SUITE 300
TAMPA FL 33607



2. Principal Place of Business
Hancock @ Washington

3. Mailing Address
Hancock @ Washington

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
Madison, GA

City & State
Madison, GA

Zip
30650

Country
USA

4. FEI Number **59-3354830**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

9. Capital Contributions as Shown on record. **\$25,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$25,000.00**

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 #	P95000086645
NAME	HOPS OF THE OHIO VALLEY, INC.
STREET ADDRESS	2701 N. ROCKY POINT DR., SUITE 300
CITY-ST-ZIP	TAMPA FL 33607
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	Hancock @ Washington
CITY-ST-ZIP	Madison, GA 30650
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	100020038801
CITY-ST-ZIP	05/28/03--01024--001 **12477.50
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	203.75
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: *Rory Williams* **5/21/03 (706) 343-2217**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)