

2001 UNIFORM BUSINESS REPORT (UBR)

0008801 AF

DOCUMENT # **A96000000230**

1. Entity Name

PALMS CENTER, LIMITED

FILED

01 JAN 29 AM 11:31

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



Principal Place of Business

**1715 N. WESTSHORE BLVD.
SUITE 750
TAMPA FL 33607**

Mailing Address

**C/O WEGMAN ASSOC
8001 N DALE MABRY STE 101A
TAMPA FL 33614**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3359591

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GRANT, JOHN A JR.
1715 N. WESTSHORE BLVD., SUITE 750
TAMPA FL 33607**

7. Name and Address of New Registered Agent

Name

John A. Grant, Jr.

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

10025 Orange Grove Drive

City

Tampa

FL

Zip Code
33618

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, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-24-01

DATE

9. Capital Contributions
as Shown on record.

\$476,607.18

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 # **P95000071378**
NAME **PALM CENTER DEVELOPMENT COMPANY**
STREET ADDRESS **1715 N. WESTSHORE BLVD., SUITE 750**
CITY-ST-ZIP **TAMPA FL 33607**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

10025 Orange Grove Drive

CITY-ST-ZIP

Tampa, FL 33618

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

Wegman Associates, Inc. by W.J. Wegman, Jr. Pres. 1/19/01 (813) 933-7418

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)