

2001 UNIFORM BUSINESS REPORT (UBR)

0010282 AF

DOCUMENT # A96000001126

1. Entity Name

COVE PARTNERSHIP #1, LTD.

FILED

01 APR 26 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

13535 FEATHER SOUND DRIVE, SUITE 125
CLEARWATER FL 33762

Mailing Address

13535 FEATHER SOUND DRIVE, SUITE 125
CLEARWATER FL 33762

2. Principal Place of Business

341 Royal Tern Rd S
Suite, Apt. #, etc.

Ponte Vedra Beach

City & State
Florida

Zip
32082

Country
USA

3. Mailing Address

341 Royal Tern Rd S
Suite, Apt. #, etc.

Ponte Vedra Beach

City & State
Florida

Zip
32082

Country
USA

4. FEI Number

59-3391562

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COVE PROPERTIES, INC.

13535 FEATHER SOUND DRIVE, SUITE 125
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name

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

341 Royal Tern Rd S.

City Ponte Vedra Beach FL

Zip Code
32082

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

Dennis M. Sheehan

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$99.00

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 # P96000050949
NAME COVE PROPERTIES, INC.
STREET ADDRESS 13535 FEATHER SOUND DRIVE, SUITE 125
CITY-ST-ZIP CLEARWATER FL 33762

13. ADDRESS CHANGES ONLY

STREET ADDRESS

341 Royal Tern Rd S

CITY-ST-ZIP

Ponte Vedra Beach FL 32082

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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

SIGNATURE:

Dennis M. Sheehan
Dennis M. Sheehan

4-27-01

904-783-
5503

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)