2003 APR 23 AM 8: 25

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

A96000001127 DOCUMENT

1. Entity Name HOBE SOUND LAND COMPANY, LTD.



OLY JON OF CORPORATIONS FALL AHASSEE, FLORIDA Mailing Address 11844 S.E. DIXIE HIGHWAY, STE. C Principal Place of Business 11844 S.E. DIXIE HIGHWAY, STE. C HOBE SOUND FL 33455 HOBE SOUND FL 33455 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 65-0682034 Applied For Not Applicable Zip Country 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 Name HOBE SOUND LAND COMPANY, INC. Street Address (P.O. Box Number is Not Acceptable) 11844 S.E. DIXIE HIGHWAY, STE. C HOBE SOUND FL 33455 City Zin 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 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 10. Amount of Capital Contributions \$5,350,000.00 400,000 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 13. P96000051051 DOCUMENT # STREET ADDRESS HOBE SOUND LAND COMPANY, INC. NAME 11844 S.E. DIXIE HIGHWAY STREET ADDRESS CITY-ST-ZIP HOBE SOUND FL 33455 CITY-ST-ZIP UUUU16813290 DOCUMENT # STREET ADDRESS NAME <u>04/23/03--01071--002 **526, 25</u> STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 empoweded to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: aniel\P!

Probe Sound Land Company SIGNING GENERAL PARTNER

CR2E003 (10/02)