

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0015696
AT

DOCUMENT # A96000001252

1. Entity Name
HIDDEN BAY AT OSPREY, LTD.



FILED
03 APR -8 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
210 HIDDEN BAY DRIVE
OSPREY FL 34229

Mailing Address
210 HIDDEN BAY DRIVE
OSPREY FL 34229

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2003

4. FEI Number 65-0682104

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DENEAL, BARBARA
210 HIDDEN BAY DRIVE
OSPREY FL 34229

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

DATE

9. Capital Contributions
as Shown on record.

\$499.00

10. Amount of Capital Contributions
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P96000042808
NAME STONE OSPREY, INC.
STREET ADDRESS 635 S. ORANGE AVENUE, #10
CITY-ST-ZIP SARASOTA FL 34236

STREET ADDRESS 3600 Torrey Pines Blvd
CITY-ST-ZIP Sarasota FL 34238

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Keri Nakamoto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

03/22/03

941-929-1052

Date

Daytime Phone #

CR2E003 (10/02)