

FILED

2003 MAR -5 AM 11:38

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A96000002262

1. Entity Name
THE TIDES MEMTOPS'L, LTD.Principal Place of Business
35000 EMERALD COAST PKWY.
DESTIN, FL 32541Mailing Address
35000 EMERALD COAST PKWY.
DESTIN, FL 32541100013526641
03/05/03--01007--021 **526.252. Principal Place of Business
546 Mary Esther Blvd
Suite, Apt. #, etc.3. Mailing Address
546 Mary Esther Blvd
Suite, Apt. #, etc.City & State
Fort Walton Beach
Zip
32548
CountryCity & State
Fort Walton Beach
Zip
32548
Country4. FEI Number
65-2165863
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ABBOTT, WILLIAM W JR.
606 HIGHWAY 98 EAST
DESTIN, FL 32541

7. Name and Address of New Registered Agent

Name
Robert Launch

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

98 Robert Launch

546 Mary Esther Blvd

City
Fort Walton Beach

FL

Zip
32548

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 *Robert M Launch* Robert M Launch 2/24/03
Signature, typed or printed name of registered agent and the filer

9. Capital Contributions as Shown on record. \$250,000.00 10. Amount of Capital Contributions in FLORIDA to date.

MAKE CHECK PAYABLE TO FL DEPT OF STATE
SEE REVERSE SIDE FOR FEE INFORMATIONA 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 #
NAME
STREET ADDRESS
CITY-STATE-ZIP
P96000070477
MEMTIDE PARTNERS, INC.
506 HIGHWAY 98 EAST
DESTIN, FL 32541STREET ADDRESS
CITY-STATE-ZIP
546 Mary Esther Blvd
Fort Walton Beach, FL 32548DOCUMENT #
NAME
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CITY-STATE-ZIPSTREET ADDRESS
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NAME
STREET ADDRESS
CITY-STATE-ZIPSTREET ADDRESS
CITY-STATE-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: *Robert M Launch* Robert M Launch 2/24/03
Signature and typed or printed name of signing general partner Date Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)

950-337-1710