

# 2002 UNIFORM BUSINESS REPORT (UBR)

0007060 AT

**DOCUMENT #** A97000000201

**1. Entity Name**  
GWIN-HART, LTD.

FILED

02 JAN 25 AM 11:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Principal Place of Business**  
36348 EMERAL COAST PKWY., STE. 1201  
DESTIN FL 32541

**Mailing Address**  
36348 EMERAL COAST PKWY., STE. 1201  
DESTIN FL 32541

**2. Principal Place of Business**  
Suite, Apt. #, etc.  
City & State  
Zip Country

**3. Mailing Address**  
Suite, Apt. #, etc.  
City & State  
Zip Country

**DUE BY MAY 1, 2002**

**4. FEI Number** 59-3490636 **Applied For**  
Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**  
GWIN, CURTIS H  
36348 EMERAL COAST PKWY., STE. 1201  
DESTIN FL 32541

**7. Name and Address of New Registered Agent**  
Name  
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.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**9. Capital Contributions** as Shown on record. **\$1,000.00**

**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 #	P96000098629
NAME	THE GWIN COMPANY OF DESTIN, INC.
STREET ADDRESS	36348 EMERAL COAST PKWY., STE. 1201
CITY-ST-ZIP	DESTIN FL 32541
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS	300004851333--4
CITY-ST-ZIP	-01/31/02--01082--001
STREET ADDRESS	*****88.75 *****88.75
CITY-ST-ZIP	300004851333--4
STREET ADDRESS	-01/31/02--01082--002
CITY-ST-ZIP	*****52.50 *****52.50
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes**

**SIGNATURE:** *Curtis H. Gwin* **Jan. 7, 2002** **850-837-0392**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER** **Daytime Phone #**

CR2E003 (9/01)