

# 2000 UNIFORM BUSINESS REPORT (UBR)

# A97000000215

DOCUMENT # A97000000215

1. Entity Name  
OASIS GARDENS LIMITED PARTNERSHIP

Principal Place of Business  
313 Congress Street  
c/o Gatehouse Group, Inc.  
Boston, MA 02210

Mailing Address  
same as principal place of business

2. Principal Place of Business  
120 Forbes Blvd.  
Suite, Apt. #, etc.  
c/o Gatehouse Group, Inc.

3. Mailing Address  
same as #2  
Suite, Apt. #, etc.  
City & State  
Mansfield, MA  
Zip  
02048

4. FEI Number  
58-2346735

Applied For  
Not Applicable

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

FILED  
01 JAN -5 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

Brian J. McDonough, Esq.  
Stearns Weaver Miller, et al.  
150 West Flagler Street  
Miami, FL 33130

## 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

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. \$100.00

10. Amount of Capital Contributions  
in FLORIDA to date. \$100.00

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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
GHG Gardens, LLC M97000000026  
c/o Gatehouse Development Inc.  
313 Congress Street  
Boston, MA 02210

## 13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP  
c/o Gatehouse Development, Inc.  
120 Forbes Blvd.  
Mansfield, MA 02048

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP	STREET ADDRESS	CITY-ST-ZIP
				400003536784--2	-01/16/01--01021--001
				****141.25	****141.25
				400003536784--2	-01/16/01--01021--002
				*****8.75	*****8.75

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/4/2001 508-337-2507

Date Daytime Phone #

Marc S. Plonskier, as Manager of General Partner

CR2E003 (9/99)