

2002 UNIFORM BUSINESS REPORT (UBR)

CD42
0008288 AV

DOCUMENT # A97000000549

1. Entity Name

NORTH PALM STORAGE PARTNERS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 APR 22 PM 2:12

Principal Place of Business

3300 PGA BLVD., SUITE 620
PALM BEACH GARDENS FL 33410-2811

Mailing Address

3300 PGA BLVD., SUITE 620
PALM BEACH GARDENS FL 33410-2811

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

65-0734539

Applied For

Not Applicable

Zip

Country

Zip

Country

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

COMAC NORTH PALM, INC.

3300 PGA BLVD., SUITE 620

PALM BEACH GARDENS FL 33410-2811

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.

DATE

9. Capital Contributions
as Shown on record.

\$540,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

908,232.58

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P97000019225
NAME COMAC NORTH PALM, INC.
STREET ADDRESS 3300 PGA BLVD., SUITE 620
CITY-ST-ZIP PALM BEACH GARDENS FL 33410-2811

STREET ADDRESS 100005326951--9
CITY-ST-ZIP 04/23/02-01067-016
****526.25 ****526.25

DOCUMENT #
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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:

ROBERT A. M. JAMES

561-775-7393

Date Daytime Phone #

CR2E003 (9/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 16, 2002

NORTH PALM STORAGE PARTNERS, LTD.
3300 PGA BLVD., SUITE 620
PALM BEACH GARDENS, FL 33410-2811

SUBJECT: NORTH PALM STORAGE PARTNERS, LTD.
Ref. Number: A97000000549

We have received your document for NORTH PALM STORAGE PARTNERS, LTD. and check(s) totaling \$526.25. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 802A00022464

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DIVISION OF CORPORATIONS
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