

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0014964
AT

DOCUMENT # **A97000000693**

1. Entity Name

GRANDE RESERVE AT PELICAN STRAND, LTD.

02 MAR 13 PM 3: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**4771 ALBERTON COURT. #3502
NAPLES FL 34105**

Mailing Address

**4771 ALBERTON COURT. #3502
NAPLES FL 34105**



2. Principal Place of Business

4770 Alberton Court

3. Mailing Address

4770 Alberton Court

Suite, Apt. #, etc.
#2602

Suite, Apt. #, etc.
#2602

DUE BY MAY 1, 2002

City & State
Naples, FL

City & State
Naples, FL

4. FEI Number
59-3437845

Applied For
Not Applicable

Zip Country
34105 U.S.A.

Zip Country
34105 U.S.A.

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

**BATEMAN, ARTHUR L
4771 ALBERTON COURT, #3502
NAPLES FL 34105**

Name
Bateman, Arthur L.
Street Address (P.O. Box Number is Not Acceptable)
4770 Alberton Court, #2602
City
Naples **FL** Zip Code
34105

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
3/11/02

9. Capital Contributions as Shown on record. **\$1,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **1,000,000.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P96000056349**
NAME **GRANDE RESERVE AT PELICAN STRAND, INC.**
STREET ADDRESS **4771 ALBERTON COURT, #3502**
CITY-ST-ZIP **NAPLES FL 34105**

STREET ADDRESS **4770 Alberton Court, #2602**
CITY-ST-ZIP **Naples, FL 34105**

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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

DATE **3/11/02** DAYTIME PHONE # **(239) 430-1012**

CR2E003 (9/01)