2002 UNIFORM BUSINESS REPORT (UBR)

					_		
DOCUMENT # A9700002265 1. Entity Name					FILED		
BERMUDA BAY DEVELOPMENT CO., LTD.					02 JAN 16 PM 2: 53		
Principal Place of Business Mailing Address					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
525 8TH ST. WEST 525 8TH ST. WEST BRADENTON FL 34205 BRADENTON FL 34205							
					1100101	1818-1920 (1887) 88 70 88 00 (1880) 8800 (1	1911 - 1918 1918 1919 1911 1881
Principal Place of Business 3. Mailing Address							
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 2002		
City & Sta	te	City & State		4. FEI Number		Applied For	
Zip Country		Zip Country		5. Certificate o	f Status Desired	Not Applicable \$8.75 Additional	
	6. Name and Address of Current	Registered Agent	<u></u>	T	7. Name and A	Address of New Registered A	Fee Required
				Name			
MAPES, REED W 525 8TH ST. WEST				Street Address (P.O. Box Number is Not Acceptable)			
BRADENTON FL 34205							
27.22				City Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its	register	l ed office or register	ed agent, or both		
SIGNATURE .							
	Signature, typed or printed name of registered agent a					DATE	
Capital Co as Shown		10. Amount of Capita in FLORIDA to da		outions	4	11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR	
	A GENERAL PARTNER T	HAT IS A BUSINESS EN	TITY M	UST BE REGIST	ERED AND A	TIVE WITH THIS OFFICE	<u> </u>
12.	NOTE: General Partners MA GENERAL PARTNER		13.	; an amendmen	t must be filed	to change a general part ADDRESS CHANGES ONL	
DOCUMENT #	P9400088660 SUNNYLEA CORPORATION			ET ADDRESS	•	715011ESS STRINGES STR	•
NAME STREET ADDRESS				ET ADDRESS		· · · · · ·	
CITY-ST-ZIP	BRADENTON FL 34205	1 1974	CITY	-ST-ZIP			
DOCUMENT # NAME	P9400088624 SARCON CORPORTION 525 8TH ST. WEST BRADENTON FL 34205			ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP			
OCUMENT #	-P95000009298		STRE	ET ADDRESS	-31	00004789	3737
TREET ADDRESS	, · · · · · · · · · · · · · · · ·			·ST-ZIP		<u>-01/22/020</u> ****526.25	1110009 ****526.25
DOCUMENT #	BRADENTON FL 34205		-	-			
IAME			STRE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-	ST-ZIP			
OCUMENT # IAME			STRE	ET ADDRESS			
TREET ADDRESS			CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
OCUMENT #		,	STREE	ET ADDRESS			
TREET ADDRESS			CITY-	ST-ZIP			
4. I hereby of indicated the receiv	ertify Mat the information supplied with a on tris report is true and accurate and the or of trustee empowered to execute this	his filing does not qualify for nat my signature shall have the report as required by Chapte	the exer he same er 620, F	nption stated in Sec legal effect as if m forida Statutes	ction 119.07(3)(i), ade under oath; th	Florida Statutes. I further certinat I am a General Partner of t	y that the information he limited partnership or

SIGNATURE:

1/7/02

94/- 708 3444 Daytime Phone #