

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000002528**

1. Entity Name

MARINA VILLAGE PARTNERS, LTD.

Principal Place of Business
601 BAYSHORE BLVD., SUITE 700
TAMPA FL 33606

Mailing Address
601 BAYSHORE BLVD., SUITE 700
TAMPA FL 33606

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. **Suite, Apt. #, etc.**

City & State **City & State**

Zip	Country	Zip	Country	4. FEI Number 59-3549832	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**BARNETT, LESLIE J
601 BAYSHORE BLVD., SUITE 700
TAMPA FL 33606**

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. \$98.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	P93000005804	STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	MADISON CONSTRUCTION, INC. 415 W. DAVIS BLVD. TAMPA FL 33606		
DOCUMENT #	P97000098898	STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	APOLLO BEACH FISHING GUIDES ASSOC., INC. 601 BAYSHORE BLVD., SUITE 700 TAMPA FL 33606		
DOCUMENT #		STREET ADDRESS CITY-ST-ZIP	500004014465-16 04716701-01005-010 ****141.25 ****141.25
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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: *Leslie J. Barnett, Pres. Apollo Beach Fishing Guide Assoc.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

00092275
AF

FILED

01 APR 11 PM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)