

# 2001 UNIFORM BUSINESS REPORT (UBR)

0007156 AF

DOCUMENT # **A97000002747**

1. Entity Name

**HORSE'S HEAD, LTD.**

FILED

01 APR 27 PM 3:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**3300 PGA BLVD., STE #805  
PALM BEACH GARDENS FL 33410**

Mailing Address  
**3300 PGA BLVD., STE #805  
PALM BEACH GARDENS FL 33410**

2. Principal Place of Business  
**3399 PGA Blvd**

3. Mailing Address  
**3399 PGA Blvd**

Suite, Apt. #, etc.  
**Suite 260**

Suite, Apt. #, etc.  
**Suite 260**

City & State  
**Palm Beach Gardens, FL**

City & State  
**Palm Beach, FL**

Zip  
**33410**

Country  
**Palm Beach**

Zip  
**33410**

Country  
**Palm Beach**

4. FEI Number  
**59-3493177**

Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**STONE, HELEN E**  
**3300 PGA BLVD., SUITE #805**  
**PALM BEACH GARDENS FL 33410**

**7. Name and Address of New Registered Agent**

Name  
**Stone, Helen E**

Street Address (P.O. Box Number is Not Acceptable)  
**3399 PGA Blvd**

**Suite 260**

City  
**Palm Beach Gardens** **FL** Zip Code  
**33410**

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. **\$260,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

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 # **P97000106144**  
NAME **HORSE'S HEAD, INC.**  
STREET ADDRESS **3300 PGA BLVD., SUITE #805**  
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

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CITY-ST-ZIP

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS **3399 PGA Blvd., Suite 260**  
CITY-ST-ZIP **Palm Beach Gardens, FL 33410**

STREET ADDRESS  
CITY-ST-ZIP  
**400004193364--5**  
**-05/10/01--01083--020**  
**\*\*\*\*526.25 \*\*\*\*526.25**

STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

STREET ADDRESS  
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:

*Helen E Stone*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**4-26-2001**

Date

Daytime Phone #

CR2E003 (11/00)