CR2E003 (10/02)

2003 LIMITED PARTNERSHIP

UN	<u>IFOR</u>	M BUSI	<u>NESS</u>	REPOR	T ()	UBR <u>)</u>						
DOCUMENT # A9800000069 1. Entity Name OSTEGO HARBOR CLUB COMPANY, LTD.								FILED 03 JUN -2 AM 8:00				
Principal Place of Business 372 LENELL ROAD FORT MYERS BEACH FL 33931				Mailing Address 372 LENELL ROAD FORT MYERS BEACH FL 33931				,	CRETARY OF LAHASSEE,			1 1 3 181 181 1 81
Principal Place of Business 3. Mailing Address												
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DUE BY MAY 1, 2003				
City & State				City & State				4. FEI Numb	er 65-080562 8	3		Applied For Not Applicable
Zip	Country		Zi	Zip Coi		ntry	y 5. Certif		ate of Status Desired		\$8.75 Additional Fee Required	
	6. Name	and Address of C	urrent Registe	red Agent				7. Name and	Address of New	Registered A	gent _	;
PEARCE, LAWRENCE L						Name						
372 LENELL ROAD						Street Ac	ddress (F	P.O. Box Numbe	er is Not Acceptab	le)		
FORT MYERS BEACH FL 33931												
7 0111						City	*				Zip Co	nde .
						City				FL	Zip Oc	,40
	ions of regist		nent for the pu	rpose of changing its	register	ed office or	registere	ed agent, or bo	th, in the State of F	florida. I am fa	ımiliar witt	1, and accept
SIGNAL UNL .	Signature, typed	or printed name of register	ed agent and title if a	ppticable.						DATE		
9. Capital Contributions as Shown on record. \$450,000.00 10. Amount of Capital in FLORIDA to date						butions.	\$ (11. MAKE CHECK PAYABLE TO FL. DEPT. OF ST SEE REVERSE SIDE FOR FEE INFORMATION				
_	A (GENERAL PART General Partne	NER THAT IS	A BUSINESS EN	ITITY M	UST BE F	REGIST	ERED AND	ACTIVE WITH TI	IS OFFICE	ner.	
12.		GENERAL PA	RTNER INFOR	MATION	13.				ADDRESS CI	HANGES ONL	.Y	
OCUMENT # L9600000279 OSTEGO DEVELOPMENT COMP			COMPANY, L.	C.	STRE	EET ADDRESS			-			
STREET ADDRESS CITY-ST-ZIP	372 LENE FORT MYI	ERS BEACH FL 3	3931		CITY	-ST-ZIP						
DOCUMENT # NAME					STRE	EET ADDRESS						<u></u>
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odcument # Name Street address					STRE	ET ADDRESS						
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NAME					STRE	ET ADDRESS	/		,			

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

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP