

# 2001 UNIFORM BUSINESS REPORT (UBR)

0014037 AF

DOCUMENT # A98000000120

1. Entity Name

SUPERIOR STORAGE-HYDE PARK, LTD.

Principal Place of Business

331 WINDWARD ISLAND  
CLEARWATER FL 33767

Mailing Address

331 WINDWARD ISLAND  
CLEARWATER FL 33767

FILED

01 FEB -8 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

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

59-3517090

Applied For

Not Applicable

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

VAN WINKLE, MARY E  
3844 BEE RIDGE ROAD, SUITE 202  
SARASOTA FL 34233

Name

Patricia Hattenburg

Street Address (P.O. Box Number is Not Acceptable)

331 Windward Island

City

Clearwater

FL

Zip Code

33767

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

Patricia Hattenburg

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/2/01

DATE

9. Capital Contributions  
as Shown on record.

\$700,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P98000020902  
NAME SUPERIOR STORAGE CENTERS, INC. OF HYDE PAR  
STREET ADDRESS 331 WINDWARD ISLAND  
CITY-ST-ZIP CLEARWATER FL 33767

STREET ADDRESS

CITY-ST-ZIP

100003677121--9

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DOCUMENT #

NAME

STREET ADDRESS

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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:

Patricia Hattenburg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/2/01

Date

727-442-9824

Daytime Phone #

CP2E003 (11/00)