

2001 UNIFORM BUSINESS REPORT (UBR)

0008703 AF

DOCUMENT # **A98000000244**

1. Entity Name

DELRAY OCEAN PARTNERS, LTD.

APPROVED
AND
FILED

01 MAY -2 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH FL 33483

Mailing Address

1801 SOUTH FEDERAL HIGHWAY
DELRAY BEACH FL 33483



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

400 E. Linton Blvd

3. Mailing Address

400 E. Linton Blvd

Suite, Apt. #, etc.

G-3

Suite, Apt. #, etc.

G3

City & State

Delray Beach, FL

City & State

Delray Beach, FL

4. FEI Number

65-0808907

Applied For

Not Applicable

Zip

33483

Country

Zip

33483

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WERBER, RICHARD
6111 BROKEN SOUND PARKWAY, N.W.
BOCA RATON FL 33987

7. Name and Address of New Registered Agent

Name *Charles Posternack*
Street Address (P.O. Box Number is Not Acceptable)
400 East Linton Boulevard
Suite G3
City *Delray Beach* FL Zip Code *33483*

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

Charles Posternack

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

(NOT Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$1,485,000.00

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 # **P97000055264**
NAME **DELRAY HISTORIC, INC.**
STREET ADDRESS **1801 SOUTH FEDERAL HIGHWAY**
CITY-ST-ZIP **DELRAY BEACH FL 33483**

13. ADDRESS CHANGES ONLY

STREET ADDRESS *400 E. Linton Blvd*
CITY-ST-ZIP *Delray Beach, FL 33483*

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

Charles Posternack

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/13/2001

Date

561.278.1169

Daytime Phone #

CR2E003 (11/00)