

**2003 LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **A98000001434**

1. Entity Name  
**PERROS GRANDE II LIMITED**



Principal Place of Business  
**455 INDIAN ROCKS ROAD  
BELLEAIR BLUFFS FL 33770**

Mailing Address  
**455 INDIAN ROCKS ROAD  
BELLEAIR BLUFFS FL 33770**

**FILED**

**03 APR 29 PM 12:43**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**



2. Principal Place of Business  
**10225 ULMERTON Rd.**  
Suite, Apt. #, etc.

3. Mailing Address  
**10225 ULMERTON Rd.**  
Suite, Apt. #, etc.

**Suite 3D**

**Suite 3D**

City & State

City & State

**Largo, FL**

**Largo, FL**

Zip  
**33771**

Country  
**USA**

Zip  
**33771**

Country  
**USA**

**DUE BY MAY 1, 2003**

4. FEI Number **59-3520214**

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

**ARSENAULT & REARDON, P.A.  
10225 ULMERTON ROAD, SUITE 2  
LARGO FL 33771**

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. I am familiar with, and accept the obligations of registered agent.

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

DATE

9. Capital Contributions  
as Shown on record, **\$12,000,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. 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 # **P98000051177**  
NAME **PERROS GRANDE II, INC.**  
STREET ADDRESS **455 INDIAN ROCKS ROAD NORTH**  
CITY-ST-ZIP **BELLEAIR BLUFFS FL 33770**

STREET ADDRESS **10225 ULMERTON Rd., #3D**  
CITY-ST-ZIP **Largo, FL 33771**

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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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**3/17/03**  
Date

Daytime Phone #

CR2E003 (10/02)