

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

02 APR 22 PM 3:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0006077 AT

DOCUMENT # **A99000000035**

1. Entity Name  
**ARMANDO PRO TENNIS, LTD.**

|  |  |
|--|--|
| Principal Place of Business<br><b>1325 MORVENWOOD ROAD<br/>JACKSONVILLE FL 32207</b> | Mailing Address<br><b>1325 MORVENWOOD ROAD<br/>JACKSONVILLE FL 32207</b> |
|--|--|



|                                |         |                     |         |   |                               |
|--------------------------------|---------|---------------------|---------|---|-------------------------------|
| 2. Principal Place of Business |         | 3. Mailing Address  |         | <b>DUE BY MAY 1, 2002</b>   |                               |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |   |                               |
| City & State                   |         | City & State        |         | 4. FEI Number<br><b>65-0838464</b>  | Applied For<br>Not Applicable |
| Zip                            | Country | Zip                 | Country | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |                               |

|  |  |  |  |  |    |                       |  |
|--|--|--|--|--|----|-----------------------|--|
| 6. Name and Address of Current Registered Agent  |  |  | 7. Name and Address of New Registered Agent                                      |  |    |                       |  |
| <b>CURTIS, C. WILLIAM III</b><br><b>2004 UNIVERSITY BLVD. WEST</b><br><b>JACKSONVILLE FL 32217</b> |  |  | Name <b>C. William Curtis, III</b>   |  |    |                       |  |
|  |  |  | Street Address (P.O. Box Number is Not Acceptable)<br><b>1325 Morvenwood Rd.</b> |  |    |                       |  |
|  |  |  | City <b>Jacksonville</b>   |  | FL | Zip Code <b>32207</b> |  |

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 *C. William Curtis, III* **C. William Curtis, III** 4/20/02  
Signature, typed or printed name of registered agent and title if applicable. DATE

|   |   |   |
|---|---|---|
| 9. Capital Contributions as Shown on record. <b>\$50,000.00</b> | 10. Amount of Capital Contributions in FLORIDA to date. <b>\$50,000</b> | 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 #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 | <b>ARMANDO, HUGO S III</b>             |                          | <b>350.00 - Up</b>           |
| STREET ADDRESS                  | <b>3505 59TH AVE. W.</b>               | CITY-ST-ZIP              | <b>88.75 - Adm</b>           |
| CITY-ST-ZIP                     | <b>BRADENTON FL 34210</b>              |                          |                              |
| DOCUMENT #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 | <b>ARMAND, HUGO JR.</b>                |                          |                              |
| STREET ADDRESS                  | <b>3505 59TH AVE. W.</b>               | CITY-ST-ZIP              |                              |
| CITY-ST-ZIP                     | <b>BRADENTON FL 34210</b>              |                          |                              |
| DOCUMENT #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 | <b>P98000024079</b>                    |                          | <b>600005362046--8</b>       |
| STREET ADDRESS                  | <b>ASCENDANT SPORTS EMPRISES, INC.</b> | CITY-ST-ZIP              | <b>04/29/02 01021 026</b>    |
| CITY-ST-ZIP                     | <b>1325 MORVENWOOD ROAD</b>            |                          | <b>****438.75 ****438.75</b> |
|                                 | <b>JACKSONVILLE FL 32207</b>           |                          |                              |
| DOCUMENT #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 |  |                          |                              |
| STREET ADDRESS                  |  | CITY-ST-ZIP              |                              |
| CITY-ST-ZIP                     |  |                          |                              |
| DOCUMENT #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 |  |                          |                              |
| STREET ADDRESS                  |  | CITY-ST-ZIP              |                              |
| CITY-ST-ZIP                     |  |                          |                              |
| DOCUMENT #                      | NAME                                   | STREET ADDRESS           |                              |
|                                 |  |                          |                              |
| STREET ADDRESS                  |  | CITY-ST-ZIP              |                              |
| 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: *C. William Curtis, III* **C. William Curtis, III, Its Chairman** 4/20/02 (904)630-7130  
Signature AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)