

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

01 APR 30 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0010966 AF

DOCUMENT # A99000001161

1. Entity Name

CORAL COVE I, LTD.

Principal Place of Business

3645 BONITA BEACH ROAD #3
BONITA SPRINGS FL 34134

Mailing Address

3645 BONITA BEACH ROAD #3
BONITA SPRINGS FL 34134

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

59-3586157

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

ERDMAN, GREGORY A
3645 BONITA BEACH ROAD #3
BONITA SPRINGS FL 34134

7. Name and Address of New Registered Agent

Name

Joshua J. Tuyls

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

3645 Bonita Beach Road Suite 3

City

Bonita Springs

FL

Zip Code

34134

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

Signature, type or printed name of registered agent and date if applicable.

(NOT Registered Agent signature required when reinstating)

DATE

[Signature]

Joshua J. Tuyls

4-23-01

9. Capital Contributions
as Shown on record.

\$100.00

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 # P99000062460
NAME CORAL COVE I, INC.
STREET ADDRESS 3645 BONITA BEACH RD #3
CITY-ST-ZIP BONITA SPRINGS FL

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

900004219709--6

05/16/01-01050-010

****150.00 ****150.00

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Joshua J. Tuyls

4-23-01

Date

941-992-8833

Daytime Phone #

CR2E003 (11/00)