

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

437.50

DOCUMENT # 301000000030

1. Entity Name

Titan Global Hedge Fund, LP

02 MAY 28 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

417 12th St. W.

3. Mailing Address

417 12th St. W.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

Suite, Apt. #, etc.

Ste # 213

Suite, Apt. #, etc.

Ste. 213

4. FEI Number

65-1070900

Applied For

Not Applicable

City & State

Bradenton, FL

City & State

Bradenton, FL

Zip

34205

Country

USA

Zip

34205

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Robert Joseph Beasley

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

417 12th St. W.

Ste. 213

City

Bradenton, FL

FL

Zip Code

34205

**DO NOT WRITE
IN THIS SPACE**

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

DATE

9. Capital Contributions
as Shown on record.

250,000.00

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 #	NAME	STREET ADDRESS	CITY - ST - ZIP	STREET ADDRESS	CITY - ST - ZIP
	Longboat Global Advisors, LLC	417 12th St. W. Ste. 213	Bradenton, FL 34205	800005677018--5	06/04/02--01031--005
				****437.50	****437.50
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	STREET ADDRESS	CITY - ST - ZIP
				800005677018--5	06/04/02--01031--006
				*****88.75	*****88.75
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE	
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP		
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP		
DOCUMENT #	NAME	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)(f), 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

Date

Daytime Phone #

941-747-7711

4/24/02

CR2E003B (12/01)

STAPLE CHECK HERE