2002 UNIFORM BUSINESS REPORT (UBR)

| 2002 UNIFORM BUSINESS REPORT (UBR) | | | | APPROVE |
|---|--|-------------------|--|---|
| DOCUMENT # B9400000438 1. Entity Name | | | | AND |
| BRONZE/PALM BAY LIMITED PARTNERSHIP | | | 02 APR 26 PM 2: 44 | |
| · | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| Principal Place of Business Mailing Address 1853 PIEDMONT ROAD 1853 PIEDMONT ROAD | | | | TAEL AHASSEL. FLURIDA |
| TERRACE LEVEL | 1853 PIEDMONT ROAD TERRACE LEVEL | - | | |
| MARIETTA GA 30066 | MARIETTA GA 30066 | MARIETTA GA 30066 | | I TERRITE IDER IERH SEDE BENG BERG BERG BERG BERG BERG BERG BERG BER |
| Principal Place of Business 3. Mailing Ar | | uiling Address | | |
| Suite, Apt. #, etc. Suite, Apt. # | | f, etc. | | DUE BY MAY 1, 2002 |
| City & State | City & State | City & State | | 4. FEI Number 58-2139183 Applied For Not Applicable |
| Zip Country | Zip Country Zip | | try | 5. Certificate of Status Desired See Required \$8.75 Additional Fee Required |
| 6. Name and Address of Curre | nt Registered Agent | | | 7. Name and Address of New Registered Agent |
| HUMPHRIES, J. GREGORY 201 E. PINE STREET, SUITE 701 | | | Name | |
| | | | Street Address (P.O. Box Number is Not Acceptable) | |
| ORLANDO FL 32801 | | | | |
| | | ı | 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. | | | | |
| SIGNATURE | | | | |
| Capital Contributions as Shown on record. \$99.00 | 9.00 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 | | | , an amendmen | ADDRESS CHANGES ONLY |
| DOCUMENT / F94000003912 NAME BRONZE HOLDINGS, INC. STREET ADDRESS 1853 PIEDMONT ROAD MARIETTA GA 30066 | | STREE | T ADDRESS | |
| | | CITY- | ST-ZIP | |
| DOCUMENT # NAME | MENT ≠ | | T ADDRESS | 2000054497225 -05/03/0201051001 |
| STREET ADDRESS CITY-ST-ZIP | | CiTY- | ST-ZIP | ****141.25 ****141.25 |
| DOCUMENT # | | STREE | T ADDRESS | |
| NAME STREET ADDRESS CITY-ST-ZIP | | CITY- | ST-ZIP | |
| DOCUMENT ≠ NAME | • | STREE | T ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY- | ST-ZiP | |
| DOCUMENT # NAME | | STREE | T ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY-S | ST-ZIP | |
| DOCUMENT # NAME | | STREE | T ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY-S | 1 | |
| 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Date | | | | |