

2001 UNIFORM BUSINESS REPORT (UBR)

0020259 SP

DOCUMENT # B96000000412

1. Entity Name

GULFSTREAM HOTEL LIMITED PARTNERSHIP

Principal Place of Business

C/O CORPORATION TRUST CENTER
1209 ORANGE STREET
WILMINGTON DE 19801

Mailing Address

C/O DANIELS REAL ESTATE DEV. COMPANY
609 PENN AVENUE, 200 ROOSEVELT BLDG.
PITTSBURGH PA 15222-3201

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01 JUN 18 PM 2:27

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

51-0378462

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

CHARLES A. LUBITZ, ESQUIRE
C/O BOOSE CASEY
515 N. FLAGLER DRIVE #1700
WEST PALM BEACH FL 33401

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

2,500.000

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 # 849042
NAME DANIELS REAL ESTATE DEVELOPMENT COMPANY
STREET ADDRESS 609 PENN AVE., 200 ROOSEVELT BUILDING
CITY-ST-ZIP PITTSBURGH PA 15222-3201

STREET ADDRESS

CITY-ST-ZIP

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2276.25 *526.25

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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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/25/01

412-355-0780

Date

Daytime Phone #

CR2E003 (11/00)