

2014 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A08000000443

Entity Name: BOA/BBRB FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

8000 HEALTH CENTER BLVD. SUITE 150
C/O BRETT OLEY-UBS
BONITA SPRINGS, FL 34135

Current Mailing Address:

8000 HEALTH CENTER BLVD. SUITE 150
C/O BRETT OLEY-UBS
BONITA SPRINGS, FL 34135 US

FEI Number: 26-2985969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HL STATUTORY AGENT, INC.
800 LAUREL OAK DRIVE
SUITE 600
NAPLES, FL 34108 US

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:

Electronic Signature of Registered Agent

Date

General Partner Detail :

Document # L08000037583
Name OLEY FAMILY LLC
Address 8000 HEALTH CENTER BLVD. SUITE
150
City-State-Zip: BONITA SPRINGS FL 34135

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRETT OLEY OLEY FAMILY LLC

MGRM

03/11/2014

Electronic Signature of Signing General Partner Detail

Date