

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A00000001842**

1. Entity Name
DETTMAN FLEMING PROPERTIES, LLLP



FILED

03 MAR 10 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**1815 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON FL 33432**

Mailing Address
**21695 MARIGOT DR.
ATTN. CHRISTINA FLEMING
BOCA RATON FL 33428**



2. Principal Place of Business
21695 Marigot Dr.

3. Mailing Address

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
Boca Raton, FL

City & State

4. FEI Number **65-0379934**

Applied For

Not Applicable

Zip **33428** Country **USA**

Zip Country

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

**DETTMAN, GREGORY L
1815 SOUTH FEDERAL HIGHWAY, SUITE 300
BOCA RATON FL 33432**

Name

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

21695 Marigot Dr. 2901 Bayview Dr.

City

Ft. Lauderdale, FL

FL

Zip Code

33308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Gregory L. Detman**
Signature, typed or printed name of registered agent and title if applicable.

DATE

2/14/03

9. Capital Contributions as Shown on record. **\$585,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #
NAME **DETTMAN, GREGORY L**
STREET ADDRESS **2901 BAYVIEW DRIVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

STREET ADDRESS

800012790358

CITY-ST-ZIP

03/10/03--01076--012 **88.75

DOCUMENT #
NAME **FLEMING, BARBARA J**
STREET ADDRESS **4106 NORTHWEST 60TH CIRCLE**
CITY-ST-ZIP **BOCA RATON FL 33496**

STREET ADDRESS

800012790358

CITY-ST-ZIP

02/19/03--01051--011 **437.50

DOCUMENT #
NAME **FLEMING, JEFFREY A**
STREET ADDRESS **21695 MARIGOT DRIVE**
CITY-ST-ZIP **BOCA RATON FL 33428**

STREET ADDRESS

CITY-ST-ZIP

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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

Date

Daytime Phone #

2/13/03

561-362-9104 x115

CR2E003 (10/02)

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