## **2003 LIMITED PARTNERSHIP** UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** 

A9300000133

1. Entity Name PIACENTI FAMILY, LTD.





Principal Place of Business
1280 WELLINGTON TERRACE MAITLAND FL 32751

Mailing Address 1280 WELLINGTON TERRACE MAITLAND FL 32751





Suite, Apt. #, elso.    DUE SY MAY 1, 2003   Applied For Forest Forest Agent   City & State   A. FEI Number 59-3154050   Not Applicable for Not Applicable	2. Principal Place of	of Business	3. Mailing Address			1 (3)(3)(1)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)(3)		
City & State    City & State   City & State   City & State   City & State   City & State   City & State   City & State   City   Country   S. Certificate of Status Desired   S8.75 Application   S8.75 Applica	Suite, Apt. #, etc. Suite, Apt. #, etc.					DUE BY MAY 1, 2003		
S. Certificate of Status Desired   Fee Required    6. Name and Address of Current Registered Agent   7. Name and Address of New Registered Agent    8. Name and Address of New Registered Agent    9. Name and Address of New Registered Agent    10. Name and Address of New Registered Agent    11. Name and Addr	City & State		City & State			4. FERNATION (1541)		
Name  PIACENTI, PETER V 1280 WELLINGTON TERRACE MATILAND FL 32751  8. The above named entity submiss this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am Itamiliar with, and accept the obligations of registered agent.  9. Capital Contributions as Shown on record.  9. Capital Contributions as Shown on record.  19. A GENERAL PARTINER 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 filled to change a general partner.  12. GENERAL PARTNER INFORMATION  13. GENERAL PARTNER INFORMATION  14. GENERAL PARTNER INFORMATION  15. GENERAL PARTNER INFORMATION  16. GENERAL PARTNER INFORMATION  17. STREET ADDRESS  17. OTHER STREET ADDRESS  18. OTHER ADDRESS  19. OT	Zip	p Country Zip		Coun	try .			
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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: