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

## A93000000849 **DOCUMENT #**

1. Entity Name
THE SHELP FAMILY LIMITED PARTNERSHIP



Principal Place of Business 10310 SOUTH OCEAN DRIVE. #708 JENSEN BEACH FL 34957

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address 10310 SOUTH OCEAN DRIVE. #708 JENSEN BEACH FL 34957

3. Mailing Address

Suite, Apt. #, etc.

FILED

2003 MAR -3 AM 8: 50

DIVIJION OF CORPORATIONS FALLAHASSEE, FLORIDA



**DUE BY MAY 1, 2003** 

City & State			City & State			4. FEI Number 65-0429116			Applied For
							05-0423110		Not Applicable
Zip	Zip Country		Country		5. Certificate of Status Desired  Fee			Additional equired	
	6. Name and Address of Curr	ent Registere	d Agent			7Name and	Address of New Registered	d Agent	
					Name				
SHELP, ROBERT H 10310 SOUTH OCEAN DRIVE #708					Street Address (P.O. Box Number is Not Acceptable)				
JENSEN B	EACH FL 34957								
				Į.	City		F		o Code
8. The above the obligation	named entity submits this stateme ons of registered agent.	nt for the purp	ose of changing its	s registered o	office or regist	tered agent, or both	n, in the State of Florida. Tai	n familiar	with, and accept
SIGNATURE -							DATE		
Signature, typed or printed name of registered agent and title if applicable.							11. MAKE CHECK PAYAB		DEPT. OF STATE
9. Capital Contributions as Shown on record. \$1,750,000.00			<ol> <li>Amount of Capital Contributions in FLORIDA to date.</li> </ol>			35. <i>0</i> 0	SEE REVERSE SIDE I	SEE REVERSE SIDE FOR FEE INFO	
as shown c	A GENERAL RADIN	ER THAT IS	A DITCINECE EN	TITY MUS	T BE BEGI	STERED AND A	CTIVE WITH THIS OFFI	CE.	
	A GENERAL PARTNI NOTE: General Partners	MAY NOT	e changed on t	he form; a	n amendm	ent must be file	d to change a general p	ai tirei.	<u> </u>
12.	GENERAL PARTNER INFORMATION			13.			ADDRESS CHANGES (	)NLY	
DOCUMENT # NAME	G93228000141 THE ROBERT H SHELP INTERVIVOS DECLARATION				ADDRESS				
STREET ADDRESS CITY-ST-ZIP	10310 SOUTH OCEAN DRIVE #708 JENSEN BEACH FL 34957			CITY-ST-	-ZIP	300 <b>01</b> 3336393 			
DOCUMENT #	G93228000140 THE MARTHA W SHELP INTERVIVOS DECLARATION			STREET #	ADDRESS	<del>- 05</del> 705.	<del>705</del> 01054025	##3 <u>6</u>	<u></u>
STREET ADDRESS CITY-ST-ZIP	10310 SOUTH OCEAN DRIVE #708 JENSEN BEACH FL 34957				- ZIP				
DOCUMENT #			* :	STREET A	ADDRESS				
STREET ADDRESS CITY-ST-ZIP		•		CITY-ST	- ZIP				
DOCUMENT #		-		STREET	ADDRESS		_		
NAME STREET ADDRESS CITY-ST-ZIP				CITY-\$T	- ZIP				
DOCUMENT #				STREET	ADDRESS				
NAME STREET ADDRESS				CITY-ST	r- ZIP				
CITY-ST-ZIP  DOCUMENT #			,	STREET	ADDRESS		· ·		
STREET ADDRESS				CITY-S1	r-ZiP				
CITY-ST-ZIP	certify that the information supplied on this report is true and accurate over or trustee empowered to execute	d with this filin e and that my ute this report	g does not qualify f signature shall have as equired by ha			n Section 119.07(3) if made under oath	(i), Florida Statutes. I further ; that I am a General Partne	certify that of the line	at the information

**SIGNATURE:** 

( ROBERT H SHELP) 2-24-03 772-224