

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000000007**

1. Entity Name
ARONOFF FAMILY LIMITED PARTNERSHIP



FILED

03 JUL 11 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**C/O ROSALYN CRANE
4522 HAZELTON LANE
LAKE WORTH FL 33467**

Mailing Address
**C/O ROSALYN CRANE
4522 HAZELTON LANE
LAKE WORTH FL 33467**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY SEPTEMBER 24, 2003

4. FEI Number **65-0453908**

Applied For
Not Applicable

Zip

Country

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

**ARONOFF, JOEL S
4522 HAZELTON LANE
LAKE WORTH FL 33467**

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

SIGNATURE Signature typed or printed name of registered agent and date if applicable.

DATE

9. Capital Contributions
as Shown on record. **\$2,327,252.00**

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 **CRANE, ROSALYN**
STREET ADDRESS **4522 HAZELTON LANE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME **MORD, ANNETTE**
STREET ADDRESS **4392 JAMES ESTATE COURT**
CITY-ST-ZIP **LAKE WORTH FL 33467**

STREET ADDRESS
CITY-ST-ZIP

**800021475048
07/11/03--01023--001 **526.25**

DOCUMENT #
NAME **ARONOFF, HERBERT**
STREET ADDRESS **6771 FUJI CIRCLE**
CITY-ST-ZIP **BOYNTON BEACH FL 33437**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME **ARONOFF, JOEL**
STREET ADDRESS **759 EAST RAMBLING DRIVE**
CITY-ST-ZIP **WELLINGTON FL 33417**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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 **ROSALYN CRANE**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/7/03
Date

561-432-
Daytime Phone **2255**

CR2E003 (4/03)

242

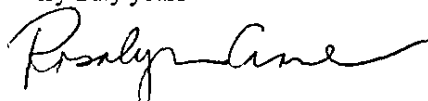
4522 Hazleton Lane
Lake Worth, Florida
33467
July 7, 2003

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

Dear Mr. Buck Kohr,

I called your office today and I was told that you will be out until Wednesday. I received the 2003 Uniform Business Report on Saturday July 5, 2003. I was asked to write a letter since the gentlemen on the phone told me I was late in my payment. This is the first report I have received. I was told to send a check in the amount of \$526.25 which I am sending with my letter.
Thank you very much for your help.

Very truly yours



Rosalyn Crane
561-432-2255