

2004 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A94000001249

1. Entity Name
RKCS LIMITED PARTNERSHIP



FILED

2004 OCT 15 P 2:28



Principal Place of Business
3006 SWANN AVENUE
TAMPA, FL 33609

Mailing Address
3006 SWANN AVENUE
TAMPA, FL 33609

2. Principal Place of Business
3424 JEAN CIRCLE
Suite, Apt. #, etc.

3. Mailing Address
3424 JEAN CIRCLE
Suite, Apt. #, etc.

City & State
TAMPA, FL

City & State
TAMPA, FL

Zip
33629

Country

Zip
33629

Country

10082004 REIN-LP CR2E100 (6/04)

4. FEI Number
59-3265486

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEWART, RANALD JR
3006 SWANN AVE.
TAMPA, FL 33609
3424 JEAN CIRCLE
TAMPA, FL 33629

7. Name and Address of New Registered Agent

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 title if applicable.

DATE

9. Capital Contributions
as Shown on record. \$140,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

In accordance with s. 607.193(2)(b), F.S.,
the limited partnership did not receive the
prior notice.

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

DOCUMENT #
NAME STEWART, RANALD JR
STREET ADDRESS 3006 SWANN AVENUE
CITY-ST-ZIP TAMPA, FL 33609

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13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
300042322673
11/01/04--01002--005 **526.25

STREET ADDRESS
CITY-ST-ZIP

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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: *Ranald Stewart Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

10/9/04

813-503-1627

Date

Daytime Phone #

RANALD STEWART JR.

STAPLE CHECK HERE