

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000001272**

1. Entity Name
FIRST DARTMOUTH COMMERCIAL, LTD.

Principal Place of Business
**6699 90TH AVE. N.
PINELLAS PARK FL 34666**

Mailing Address
**6699 90TH AVE. N.
PINELLAS PARK FL 34666**

FILED
01 SEP 10 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business
742 2ND AVENUE SOUTH
Suite, Apt. #, etc.

3. Mailing Address
742 2ND AVENUE SOUTH
Suite, Apt. #, etc.

DUE BY SEPTEMBER 26, 2001

City & State
ST. PETERSBURG, FL

City & State
ST. PETERSBURG, FL

Zip
33701 Country
USA

Zip
33701 Country
USA

4. FEI Number **59-3269035** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
RICE, MARTIN E
333 THIRD AVE., N., STE 325
ST PETERSBURG FL 33701

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
742-2ND AVENUE S.
City **ST. PETERSBURG FL** Zip Code **33701**

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$2,088.00** 10. Amount of Capital Contributions in FLORIDA to date. **2,088** 11. MAKE CHECK PAYABLE TO 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 # **P93000027202**
NAME **DARTMOUTH DEVELOPMENT I, INC.**
STREET ADDRESS **5901 SUN BOULEVARD, SUITE 100-A**
CITY-ST-ZIP **ST. PETERSBURG FL 33715**

STREET ADDRESS **742-2ND AVENUE S.**
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

DOCUMENT # **P94000067463**
NAME **JORGE ECHARTE, JR., INC.**
STREET ADDRESS **5901 SUN BOULEVARD, SUITE 100-A**
CITY-ST-ZIP **ST. PETERSBURG FL 33715**

STREET ADDRESS **742-2ND AVENUE S.**
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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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**

9/5/01 **727 541-1100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

0002280 AT

CR2E003 (5/01)

STAPLE CHECK HERE