

2002 UNIFORM BUSINESS REPORT (UBR)

0012326 AT

DOCUMENT # **A96000002375**

1. Entity Name

MARVIN AND LYNN HECHT FAMILY LIMITED PARTNERSHIP

FILED

2002 MAY -8 AM 11:17

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business 4876 PINEVIEW CIRCLE DELRAY BEACH FL 33445	Mailing Address 4876 PINEVIEW CIRCLE DELRAY BEACH FL 33445
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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DUE BY MAY 1, 2002	
4. FEI Number 65-0731462	Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HECHT, MARVIN 4876 PINE VIEW CIRCLE DELRAY BEACH FL 33445

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

9. Capital Contributions as Shown on record. \$264,010.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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	STREET ADDRESS	
NAME	HECHT, MARVIN	CITY-ST-ZIP	
STREET ADDRESS	4876 PINEVIEW CIRCLE		
CITY-ST-ZIP	DELRAY BEACH FL 33445		
DOCUMENT #	NAME	STREET ADDRESS	000005600690--1
NAME	HECHT, LYNN	CITY-ST-ZIP	05/24/02--01001--021
STREET ADDRESS	4876 PINEVIEW CIRCLE		*****526.25 *****526.25
CITY-ST-ZIP	DELRAY BEACH FL 33445		
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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: *Marvin Hecht* **5/1/02** **561 445-0893**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)