

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000002508**

1. Entity Name
9500 BUILDING, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN 13 PM 4:53

WLC 1/15

Principal Place of Business
**2020 KING AIR COURT
DAYTONA-BEACH FL 32128-2534**

Mailing Address
**2020 KING AIR COURT
DAYTONA-BEACH FL 32128-2534**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
Port Orange FL

City & State
Port Orange FL

4. FEI Number **65-0879455**

Applied For
Not Applicable

Zip
32128-6931

Country
USA

Zip
32128-6931

Country
USA

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

**9500 BUILDING, INC.
2020 KING AIR COURT
DAYTONA-BEACH FL 32128**

Name

Street Address (P.O. Box Number is Not Acceptable)

Port Orange

FL

Zip Code

32128-6931

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.

\$300,000.00

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 # **P98000092908**
NAME **9500 BUILDING, INC.**
STREET ADDRESS **2020 KING AIR COURT**
CITY-ST-ZIP **DAYTONA BEACH FL 32128**

STREET ADDRESS

CITY-ST-ZIP

200010059072
01/13/03 01005 004 *\$526.25

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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: RETAUSTEN, VPres 1/10/03 386-761-1882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

0006978
AT