

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001388**

1. Entity Name

GOLDDIGGERS INVESTMENT CLUB, A FLORIDA LIMITED P

FILED

00 FEB 22 AM 10: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

3305 ALLAMANDA CT.
KISSIMMEE FL 34746

3305 ALLAMANDA CT.
KISSIMMEE FL 34746-2730

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3408461

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

BEHRE, MARY F
3305 ALLAMANDA CT.
KISSIMMEE FL 34746

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$24,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$23,500.00

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 #	NAME	STREET ADDRESS	CITY - ST - ZIP
	BEHRE, MARY F	3305 ALLAMANDA CT.	KISSIMMEE FL 34746
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	NOSSAL, RITA M	2646 MCDANIEL DR.	KISSIMMEE FL 34758
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	GENDALL, ALYCE J	4872 JAMAICA LN.	KISSIMMEE FL 34746
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	SHIELDS, EILEEN A	2730 MONTEGO BAY BLVD.	KISSIMMEE FL 34746
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	THURSTONE, ARLENE	3312 ALLAMANDA CT.	KISSIMMEE FL 34746
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	WILLIAMS, BETTY F	3311 ALLAMANDA CT.	KISSIMMEE FL 34746

STREET ADDRESS	FF \$253.25
CITY - ST - ZIP	7000003145297-5
STREET ADDRESS	-02/23/00--01102--004
CITY - ST - ZIP	****305.77 ****253.25
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
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: MARY F. BEHRE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

MARY F. BEHRE

Date

Daytime Phone #

CR2E003 (9/99)