

Due By May 1, 2004

DOCUMENT # A00000000119

1. Entity Name
JERICHO PARTNERS LIMITED PARTNERSHIP



FILED
Jan 13, 2004 08:00 AM
Secretary of State

Principal Place of Business
1470 JAMAICA COURT
MARCO ISLAND, FL 34145

Mailing Address
1470 JAMAICA COURT
MARCO ISLAND, FL 34145



01072004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3618423

Applied For
Not Applicable

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

MILLER, MERLIN
1470 JAMAICA COURT
MARCO ISLAND, FL 34145

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. \$957,000.00

10. Amount of Capital Contributions
in FLORIDA to date. \$957,000.00

\$526.25

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 # P98000069025
NAME BLACK KNIGHT PRODUCTIONS, INC.
STREET ADDRESS 1470 JAMAICA COURT
CITY- ST- ZIP MARCO ISLAND, FL 34145

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

000000004100
01/14/04-00015-002 526.25

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: *Merlin Miller*