

LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY 15 PM 2:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # A00000000488
1. Entity Name
GOODHEART PARTNERSHIP, LTD.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
352 EAGLE DRIVE
Suite, Apt. #, etc.

3. Mailing Address
352 EAGLE DRIVE
Suite, Apt. #, etc.

City & State
JUPITER, FL

City & State
JUPITER, FL

Zip
33477

Country

5/15

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number
65-0992194

Applied For
 Not Applicable

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

MJH

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

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 _____ DATE _____

9. Capital Contributions as Shown on record. **3,960,931.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$4,014,059**

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		STREET ADDRESS	CITY - ST - ZIP
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	GOODHEART, HOWARD L 352 EAGLE DRIVE JUPITER, FL 33477		
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	GOODHEART, HELEN 352 EAGLE DRIVE JUPITER, FL 33477		
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			200005637022-2 -05/29/02--01025--011 ****526-25 ****526-25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			DO NOT WRITE IN THIS SPACE
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			
DOCUMENT # NAME 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)(b), 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:  **Howard Goodheart** 4-11-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR25003R (12/01)