

2001 UNIFORM BUSINESS REPORT

A00000000517

DOCUMENT #

A00000000517

1. Entity Name

COURTHOUSE ASSOCIATES, LTD.

FILED

01 MAY -1 PM 5:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

455 Longboat Club Rd.
Longboat Key, FL 34228

455 Longboat Club Rd.
Longboat Key, FL 34228

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

65-0245786

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAUFFMAN, MARK S.
455 Longboat Club Road
Longboat Key, FL 34228

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.

\$7,500.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$7,500.00

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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

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NAME Kauffman, Mark S.
STREET ADDRESS 455 Longboat Club Rd.
CITY-ST-ZIP Longboat Key, FL 34228

STREET ADDRESS

CITY-ST-ZIP

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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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mark S. Kauffman,
General Partner

4/16/01

Date

(941) 366-6660

Daytime Phone #

CR2E003 (11/00)

Law Offices
ABEL, BAND, RUSSELL, COLLIER, PITCHFORD & GORDON
CHARTERED

Huntington Plaza
240 South Pineapple Avenue
P.O. Box 49948
Sarasota, Florida 34230-6948
Phone (941) 366-6660
Fax (941) 366-3999

Tandem Center
Suite 199
333 S. Tamiami Trail
Venice, Florida 34285
Phone (941) 485-8200
Fax (941) 488-9436

MEMORANDUM

To: File
From: Gatha K. Milhorn
Date: March 27, 2000
Re: Restore Partnership
File: 10613-1

PLEASE NOTE THAT THIS PARTNERSHIP WAS
INADVERTENTLY CANCELED ON 4/5/99.

THE PARTNERSHIP WAS THEREFORE RESTORED
ON 3/23/00 BY FILING A NEW CERTIFICATE,
INTENDING THAT THE PARTNERSHIP CARRY ON
ITS BUSINESS AS IF THE CANCELLATION HAD
NEVER OCCURRED.

THEREFORE, A NEW TAX ID NUMBER IS NOT
NECESSARY AND WILL REMAIN 65-0245786.