

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000522

1. Entity Name

SHERIDAN PARTNERS, LTD.

Principal Place of Business

6129 S.W. 70TH STREET
SOUTH MIAMI FL 33143

Mailing Address

PO BOX 432810
MIAMI FL 33243

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

65-0997845

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

KANZIGER, ROBERT A ESQUIRE
9130 S. DADELAND BLVD., SUITE 1705
MIAMI FL 33156

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.

\$1,000,000.00

10. Amount of Capital Contributions

in FLORIDA to date. \$1,200,000.00

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 # P00000018888
NAME FREDRIC B. BURNS, CORP.
STREET ADDRESS 6129 S.W. 70TH STREET
CITY-ST-ZIP SOUTH MIAMI FL 33143

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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

FREDRIC B. BURNS, CORP.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Fredric B. Burns, Pres. 4/24/01 305-661-5058

Date

Daytime Phone #

FILED

01 MAY 31 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



8/31

DO NOT WRITE IN THIS SPACE

JM

FF 526.25

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-06/01/01--01028--010

1250.00 **88.75

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-04/27/01--01089--021

****437.50 ****437.50