

2002 UNIFORM BUSINESS REPORT (UBR)

0004694 AV

DOCUMENT # **A00000000732**

1. Entity Name

D.B.S., LTD., LLLP

Principal Place of Business

Mailing Address

**1515 RINGLING BLVD
SUITE 890
SARASOTA FL 34236**

**1515 RINGLING BLVD
SUITE 890
SARASOTA FL 34236**

FILED

2002 MAR -5 AM 10:53



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 890 % GEMER

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

65-1018378 APPLIED FOR

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

**GEMER, LARRY
1515 RINGLING BLVD
SUITE 890
SARASOTA FL 34236**

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 file if applicable.

Larry Emer CPA

1/7/02

DATE

9. Capital Contributions
as Shown on record.

\$30.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # **P94000088660**
NAME **SUNNYLEA CORPORATION**
STREET ADDRESS **1515 RINGLING BLVD SUITE 890**
CITY-ST-ZIP **SARASOTA FL 34236**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

SIGNATURE:

Thomas Whealy
President - Sunnylea Corporation
1/30/02 (941) 951-2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE