

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A00000000898**

1. Entity Name  
**SHERIDAN PARTNERS PHASE II, LTD.**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 FEB 17 PM 2:48



Principal Place of Business  
**6129 S.W. 70TH STREET  
SOUTH MIAMI FL 33143**

Mailing Address  
**6129 S.W. 70TH STREET  
SOUTH MIAMI FL 33143**

2. Principal Place of Business

3. Mailing Address  
**PO Box 43-2810**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1, 2003**

City & State

City & State

**South Miami, FL 33243**

4. FEI Number **65-1013886**

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

**KANZIGER, ROBERT A  
9130 S. DADELAND BLVD., STE-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. 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. **\$1,500,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. 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 # **P00000053216**  
NAME **F.B. BURNS CORP**  
STREET ADDRESS **6129 S.W. 70TH STREET**  
CITY-ST-ZIP **SOUTH MIAMI FL**

STREET ADDRESS

CITY-ST-ZIP

**800011155938  
01/29/03--01007--010 \*\*437.50**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**800011155938  
02/17/03--01078--003 \*\*88.75**

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CR2E003 (10/02)

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: **Fredric B. Burns, President**  
**SHERIDAN PARTNERS PHASE II, LTD.**

1-13-03 305-661-5058

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #