

# 2001 UNIFORM BUSINESS REPORT (UBR)

0006497 AF

DOCUMENT # A00000001273

1. Entity Name

FOUR OF NINE, LIMITED

FILED

01 MAY 24 PM 4:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

1451 CYPRESS CREEK ROAD, SUITE 300  
FORT LAUDERDALE FL 33309

Mailing Address

1451 CYPRESS CREEK ROAD, SUITE 300  
FORT LAUDERDALE FL 33309

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

HJM

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GILLESPIE, R. BOWEN  
1515 SOUTH FEDERAL HIGHWAY, SUITE 300  
BOCA RATON FL 33432

7. Name and Address of New 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

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.

\$0.00

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

DOCUMENT # P96000076976  
NAME J. LANDON, INC.  
STREET ADDRESS 1451 CYPRESS CREEK ROAD, SUITE 300  
CITY-ST-ZIP FORT LAUDERDALE FL 33309

DOCUMENT #  
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CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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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)(l), 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:

J. LONDON, INC. (Signature)

Date

Daytime Phone #

4/24/01

CR2E003 (11/00)