

2001 UNIFORM BUSINESS REPORT (UBR)

003322 AF

DOCUMENT # A00000001545

1. Entity Name

MATSCO FAMILY LIMITED PARTNERSHIP

FILED

OT MAR 14 AM 10:49

Principal Place of Business
7910 N. UPPER RIDGE DRIVE
PARKLAND FL 33067

Mailing Address
7910 N. UPPER RIDGE DRIVE
PARKLAND FL 33067

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1048607

Applied For
Not Applicable

Zip

Country

Zip

Country

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

WHEELER, RODNEY SCOTT
7910 N. UPPER RIDGE DRIVE
PARKLAND FL 33067

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.

\$2,300,000.00

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 # P00000091252
NAME MATSCO, CORP.
STREET ADDRESS 7910 N. UPPER RIDGE DRIVE
CITY-ST-ZIP PARKLAND FL 33067

STREET ADDRESS 400003854864--6
CITY-ST-ZIP -03/15/01--01102--003
****526.25 ****526.25

DOCUMENT #
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STREET ADDRESS
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:

SIGNATURE RECD. RODNEY SCOTT WHEELER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/10/01 (954) 384-9119

Date

Daytime Phone #

CR2E003 (11/00)