

2001 UNIFORM BUSINESS REPORT (UBR)

192

DOCUMENT #

1. Entity Name

A-1572

RISTELLO III LIMITED PARTNERSHIP

FILED

01 OCT 17 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5538 DINAH LANE
Sarasota, FL. 34231

7350 So. Tamiami TR.
#86
SARASOTA FL. 34231

2. Principal Place of Business

3. Mailing Address

7350 So. Tamiami TR. #86

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Sarasota FL.

4. FEI Number

65-1041921

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip 34231

Country USA

Zip 34231

Country USA

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

RICHARD A. FASANELLI
5538 DINAH LANE
Sarasota, FL. 34231

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.

\$0.00

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
STELLA LOUISE GRAY
5538 DINAH LANE
Sarasota Florida 34231

STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP
700004653437--9
-10/25/01--01029--029
****150.00 ****150.00

DOCUMENT #
NAME
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CITY-ST-ZIP
STELLA LOUISE GRAY
5538 DINAH LANE
Sarasota Florida 34231

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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:

Richard A. Fasanelli

10-5-2001 941-924-1024

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CRZE003 (11/00)