

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000001614

1. Entity Name

Sarasota 100 Limited Partnership

Principal Place of Business

100 Wallace Avenue
Suite 310A
Sarasota, FL 34237

Mailing Address

P.O. Box 15026
Sarasota, FL 34277

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
01 JUN 28 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2587857

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Stanley William Moore, President
Sarasota 100 Inc.
100 Wallace Avenue, Suite 310A
Sarasota, FL 34237

7. Name and Address of New Registered Agent

Name STANLEY WILLIAM MOORE PRESIDENT

Street Address (P.O. Box Number is Not Acceptable)

100 WALLACE AVE, SUITE 310

City SARASOTA

FL

Zip Code 34237

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

SPW Moore

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

6/26/01

DATE

9. Capital Contributions

as Shown on record.

88,300.00

10. Amount of Capital Contributions

in FLORIDA to date.

88,300.00

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

DOCUMENT # P00000099209
NAME Sarasota 100 Inc.
STREET ADDRESS 100 Wallace Ave., Ste 310A
CITY-ST-ZIP Sarasota, FL 34237

DOCUMENT #
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CITY-ST-ZIP

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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS 100004463601--0
CITY-ST-ZIP -07/11/01-01063-015
****526.25 ****526.25

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

SPW Moore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/1/01

Date

941-365-3800

Daytime Phone #

CR2E003 (11/00)