

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A01000000149**

1. Entity Name

THE JURKA FAMILY LIMITED PARTNERSHIP

Principal Place of Business

**6 GARDEN STREET, APT. 101P
TEQUESTA FL 33469**

Mailing Address

**6 GARDEN STREET, APT. 101P
TEQUESTA FL 33469**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY SEPTEMBER 25, 2002

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

7. Name and Address of New Registered Agent

REINSTEIN, JOEL

5355 TOWN CENTER ROAD, SUITE 801

BOCA RATON FL 33486

Name

JONATHAN L. SHEPARD

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

5355 Town Center Road, Suite 801

City

Boca Raton

FL

Zip Code

33486

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

07/24/02

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

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 # **P00000113390**
NAME **JURKA FAMILY CORP.**
STREET ADDRESS **6 GARDEN STREET, APT. 101P**
CITY-ST-ZIP **TEQUESTA FL 33469**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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DOCUMENT #
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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

JURKA FAMILY CORP.

SIGNATURE: BY: **Barbara Jurka**, Barbara Jurka, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

APPROVED
AND
FILED

02 SEP 13 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



0001249 AT

CR2E003 (4/02)

2 of 2

The Jurka Family Limited Partnership
6 Garden Street, Apt. 101-P
Tequesta, FL 33469

September 9, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Reference Number A01000000149

Dear Sir/Madam:

Our counsel, Jonathan Shepard, spoke to your office today to advise you that we never received the initial Uniform Business Report for The Jurka Family Limited Partnership. Accordingly, when we filed the report with you in July (copy enclosed), we did not understand this to be a late report.

This is to confirm that we never received the initial Uniform Business Report and that the first Uniform Business Report that we received is the one signed and enclosed with this letter. We understand that based on this information the Secretary of State will not charge us the \$400 late fee which would otherwise be due.

Accordingly, we have enclosed \$141.25 in full payment of the filing fee due for The Jurka Family Limited Partnership 2002 Uniform Business Report.

Very truly yours,

THE JURKA FAMILY LIMITED PARTNERSHIP

BY: JURKA FAMILY CORP.

Barbara Jurka

By: Barbara Jurka, President