

2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

001480 AT

DOCUMENT # A01000000186

1. Entity Name
MARY W. MARTIN FAMILY LIMITED PARTNERSHIP



Principal Place of Business
2025 SYLVESTER ROAD, QQ2
LAKELAND FL 33803

Mailing Address
2025 SYLVESTER ROAD, QQ2
LAKELAND FL 33803

FILED
03 APR -2 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 65-1066459

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MARTIN, MARY W
2025 SYLVESTER ROAD, QQ2
LAKELAND FL 33803

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record. \$921,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 MARTIN, MARY W
STREET ADDRESS 2025 SYLVESTER ROAD, QQ2
CITY-ST-ZIP LAKELAND FL 33803

STREET ADDRESS

CITY-ST-ZIP

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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:

Mary W. Martin
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/28/03

Date

Daytime Phone #

863-688-2999

184-866-2999

CR2E03 (10/02)

LAW OFFICES OF MARK F. DAHLE, P. A.

5150 SOUTH FLORIDA AVENUE
BUILDING A, SUITE 105
POST OFFICE BOX 6629
LAKELAND, FLORIDA 33807-6629

MARK F. DAHLE

TELEPHONE (863) 644-3307
TOLL FREE (800) 801-2228
FACSIMILE (863) 646-6992

ALSO ADMITTED TO PRACTICE IN
SOUTH CAROLINA AND BEFORE THE
UNITED STATES TAX COURT

E-MAIL: DAHLELAW@GTE.NET

MEMBER OF
NATIONAL NETWORK OF ESTATE PLANNING ATTORNEYS
NATIONAL ACADEMY OF ELDER LAW ATTORNEYS
ACADEMY OF FLORIDA ELDER LAW ATTORNEYS

March 28, 2003

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314-6327

FIRST CLASS MAIL

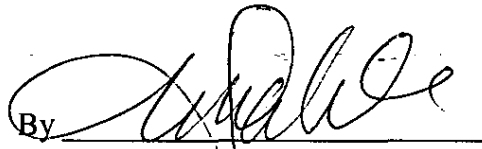
SUBJECT: Mary W. Martin Family Limited Partnership
2003 Limited Partnership Uniform Business Report

Dear Sir or Madam:

Enclosed for filing you will please find the 2003 Limited Partnership Uniform Business Report for the Mary W. Martin Family Limited Partnership, together with payment of \$526.25 by my client's check number 0936. Thank you for your attention to this matter.

Very truly yours,

Law Offices of Mark F. Dahle, P. A.

By 
Mark F. Dahle

C2737.02:rr
Enclosure