

# 2002 UNIFORM BUSINESS REPORT (UBR)

0005717 AT

DOCUMENT # A01000000545

1. Entity Name  
SPERBER ENTERPRISES, LTD.

FILED

02 MAY -9 AM 11:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
220 S. RIDGEWOOD AVENUE, SUITE 200  
DAYTONA BEACH FL 32114

Mailing Address  
220 S. RIDGEWOOD AVENUE, SUITE 200  
DAYTONA BEACH FL 32114



2. Principal Place of Business  
225 Fentress Blvd.

3. Mailing Address  
225 Fentress Blvd.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State  
Daytona Beach, FL

City & State  
Daytona Beach, FL

4. FEI Number  
52-2308983

Applied For  
Not Applicable

Zip  
32114

Country  
USA

Zip  
32114

Country  
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

**JOHNSON, ROBERT L**  
220 S. RIDGEWOOD AVENUE, SUITE 200  
DAYTONA BEACH FL 32114

## 7. Name and Address of New Registered Agent

Name **JOHNSON, ROBERT L**

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.

DATE

9. Capital Contributions as Shown on record. **\$150,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$65,000**

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 # **L01000004914**  
NAME **PS MANAGEMENT, LLC**  
STREET ADDRESS **220 S. RIDGEWOOD AVENUE, SUITE 200**  
CITY-ST-ZIP **DAYTONA BEACH FL 32114**

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STREET ADDRESS  
CITY-ST-ZIP

## 13. ADDRESS CHANGES ONLY

STREET ADDRESS **225 Fentress Blvd.**

CITY-ST-ZIP **Daytona Beach, FL 32114**

STREET ADDRESS

CITY-ST-ZIP **000005558590--5**  
**-05/20/02--01010--008**  
**\*\*\*\*526.25 \*\*\*\*526.25**

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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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: *Permy Specter*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)