

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A01000001366

1. Entity Name

THE MAURICE AND BONNIE H. SHAMS FAMILY LIMITED PARTNERSHIP, NUMBER 1

Principal Place of Business

1509 DRUID ISLE ROAD  
MAITLAND FL 32751

Mailing Address

1509 DRUID ISLE ROAD  
MAITLAND FL 32751

FILED

02 SEP 16 PM 5:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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

SHAMS, MAURICE

MORAN & SHAMS, P.A.

111 NORTH ORANGE AVENUE, SUITE 1200

ORLANDO FL 32801

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.

\$1,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

SAME

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

SHAMS, MAURICE "MO"  
1509 DRUID ISLE ROAD  
MAITLAND FL 32751

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

SHAMS, BONNIE H  
1509 DRUID ISLE ROAD  
MAITLAND FL 32751

STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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\*\*\*\*141.25 \*\*\*\*141.25

BK

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (4/02)

MORAN SHAMS, P.A.

ATTORNEYS AT LAW

SA01000001366

FILED

02 SEP 16 PM 5:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DAVID E. ACKLEY

SCOTT L. HALL

SCOTT E. JOHNSON

JOHN P. JUNOD

JAMES F. KIDD

CLINTON C. LYONS, JR.

BRIAN J. MORAN

THOMAS P. MORAN

MAURICE SHAMS

SIDNEY H. SHAMS

OF COUNSEL  
GARY M. BERKSON

RONALD W. SIKES

September 11, 2002

Florida Department of State  
Attn: Buck Kohr  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Maurice and Bonnie H. Shams Family Limited Partnership, Number 1  
Reference No.: A01000001366/ Your letter number 002A00051194

Dear Mr. Kohr:

I am receipt of your letter of September 5, 2002, regarding the above-referenced partnership. Your letter indicates that a UBR notice was sent in January, 2002 that was supposed to have been filed by May 1, 2002. However, the only notice I got was received on July 2, 2002, which indicated that it must be filed by September 25, 2002.

Therefore, I am re-submitting the UBR, along with a check in the amount of \$141.25 for the filing fee.

If you have any questions, please contact me.

Sincerely,

Maurice Shams

MS/bjl  
enclosures

BK