

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A01000001421

1. Entity Name  
EDEWAARD FAMILY LIMITED PARTNERSHIP



FILED

03 MAR 13 AM 8:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
11 SE 7TH STREET  
POMPANO BEACH FL 33060

Mailing Address  
11 SE 7TH STREET  
POMPANO BEACH FL 33060

2. Principal Place of Business  
103 NW 2 Avenue  
Suite, Apt. #, etc.

3. Mailing Address  
103 NW 2 Avenue  
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State  
Ft Land, FL  
Zip  
33311  
Country  
USA

City & State  
Ft Land, FL  
Zip  
33311  
Country  
USA

4. FEI Number 65-1156509

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

EDEWAARD, C. CRAIG  
11 SE 7TH STREET  
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name EDEWAARD, C. Craig  
Street Address (P.O. Box Number is Not Acceptable)  
103 NW 2 Avenue  
City Ft Land, FL FL Zip Code 33311

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.

2.5.03

DATE

9. Capital Contributions as Shown on record. \$1,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$1000

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

DOCUMENT #  
NAME EDEWAARD, C. CRAIG  
STREET ADDRESS 11 SE 7TH STREET  
CITY-ST-ZIP POMPANO BEACH FL 33060

DOCUMENT #  
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CITY-ST-ZIP

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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 103 NW 2 Ave  
CITY-ST-ZIP Ft Land, FL 33311

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS 400014067644  
CITY-ST-ZIP 03/13/03--01059--017 \*\*141.25

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

M THOMAS

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

2.5.03 954 523 5615

Date

Daytime Phone #

CR2E003 (10/02)