

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A01000001582

1. Entity Name

PERRINE RANCH LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 APR -4 PM 1:07

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9020 Rancho del Rio Drive

3. Mailing Address

(same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 125

City & State

City & State

New Port Richey, Florida

4. FEI Number

65-1159296

Applied For

Not Applicable

Zip

Country

Zip

Country

34655

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Alex Deeb

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

9020 Rancho del Rio Drive

Suite 125

City

New Port Richey

FL

Zip Code

34655

**DO NOT WRITE
IN THIS SPACE**

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.

\$4,000.00

10. Amount of Capital Contributions

in FLORIDA to date.

\$4,000.00

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

DOCUMENT # K47763
NAME Tri County Development, Inc.
STREET ADDRESS 9020 Rancho del Rio Drive, Ste 125
CITY-ST-ZIP New Port Richey, FL 34655

STREET ADDRESS

CITY-ST-ZIP

700005258437--5
-04/12/02--01092--007

DOCUMENT # P01000088707
NAME Oakridge Perrine, Inc.
STREET ADDRESS 8801 River Crossing Blvd.
CITY-ST-ZIP New Port Richey, Florida 34655

STREET ADDRESS

CITY-ST-ZIP

****141.25 ****141.25

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/12/02 (727) 376-6831

Date

Daytime Phone #

CR2E003B (12/01)