2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

A0200000213 **DOCUMENT #**

1. Entity Name

THE J & R CHERRY FAMILY LIMITED PARTNERSHIP



Principal Place of Business 17551 STEPPING STONE DRIVE FT. MYERS FL 33912

Mailing Address 17551 STEPPING STONE DRIVE

FT. MYERS FL 33912

FILED

2003 FEB 17 AM 11: 16

DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA



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2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.			5	Suite, Apt. #, etc.				DUE BY MAY 1, 2003				
City & State				City & State			4. FEI Numbe			Applied For		
Zip Country		Z	Zip		try 5. Certificate of Status Desired [of Status Desired	Not Applicable \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent							7. Name and	Address of New Register		equirea		
CHERRY, RICHARD G						Name						
4400 PGA BLVD., SUITE 900						Street Address (P.O. Box Number is Not Acceptable)						
PALM BEACH GARDENS FL 33410						<u> </u>						
						City			Zip	Code	\dashv	
8. The above the obligat	e named entity tions of registe	submits this statement ered agent.	for the pu	rpose of changing its	registere	ed office or regis	stered agent, or both	n, in the State of Florida. I a	am familiar	with, and accep		
SIGNATURE	Signature, typed o	or printed name of registered age	nt and title if a	annlicable			<u> </u>					
9. Capital Co as Shown	ontributions	\$250,000.00	a di lo bid ii c	10. Amount of Capita in FLORIDA to da		outions	· · · · · · · · · · · · · · · · · · ·	11. MAKE CHECK PAYAE	BLE TO FL.	DEPT. OF STATE	\dashv	
	A C	ENERAL PARTNER General Partners M	THAT IS	A BUSINESS EN	TITY M	UST BE REGI	ISTERED AND AG	SEE REVERSE SIDE CTIVE WITH THIS OFF to change a general p		IFURMATION	\dashv	
12.		GENERAL PARTN	ER INFOR	MATION	13.	, an amenum	ent must be med	ADDRESS CHANGES			4	
DOCUMENT # NAME J&R FAMILY, INC.								ADDRESS CHANGES	JINLY		٦,	
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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:

RUPRVIDE President 2/5/03