

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2003 8:00 A
Secretary of State

DOCUMENT # A02000000845

1. Entity Name
BOJANA PARTNERS LTD.



Principal Place of Business
**600 CENTRAL AVENUE
SUITE 365
HIGHLAND PARK IL 60035
US**

Mailing Address
**600 CENTRAL AVENUE
SUITE 365
HIGHLAND PARK IL 60035
US**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number

01-0720996

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FELNER, JAY

A02000000845

**4182 LIVE OAK BOULEVARD
DELRAY BEACH FL 33445**

Name

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

City

FL

Zip Code

I, 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.

HIGHLAND PARK IL 60035

HIGHLAND PARK IL 60035

U.S. SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions
as Shown on record.

\$0.00

10. Amount of Capital Contributions
in FLORIDA to date.

553,600.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **F00000005951**
NAME **FELNER REALTY CORP.**
STREET ADDRESS **600 CENTRAL AVENUE SUITE 365**
CITY-ST-ZIP **HIGHLAND PARK IL 60035**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **FELNER, JAY**
NAME **FELNER, JAY**
STREET ADDRESS **4182 LIVE OAK BOULEVARD**
CITY-ST-ZIP **DELRAY BEACH FL 33445**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # **\$0.00**
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: **Felner Realty Corp.**
By: Robert U. Goldman, V.P. 3/25/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE