## **2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)**

## A0200000880 **DOCUMENT #**

Entity Name
 HARLLEE INVESTMENTS, LTD.



SECRETARY OF STATE DIVISION OF CORPORATIONS

				03 APR -	· 1 PH 12: 42		
Principal Place of Business 2106 5TH AVENUE WEST PALMETTO FL 34221		Mailing Address 2106 5TH AVENUE WEST PALMETTO FL 34221			,	Il <b>ar</b> iai (aria) dani aria (aria	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY MAY 1, 2003			
City & State		City & State			0468122	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired			
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent			
HARLLEE, JOHN P III 1227 9TH AVENUE WEST BRADENTON FL 34205			Name Street Address	reet Address (P.O. Box Number is Not Acceptable)			
			City	FL Zip Code		Zip Code	
<ul> <li>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 act the obligations of registered agent.</li> <li>SIGNATURE Signature, typed or printed name of registered agent and title if applicable.</li> </ul>						niliar with, and accept	
9. Capital Contributions as Shown on record. \$5,000,000.00 In FLORIDA to date				ributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF S SEE REVERSE SIDE FOR FEE INFORMATION			
				EGISTERED AND ACTIVE WITH THIS OFFICE. dment must be filed to change a general partner.			
12	GENERAL PARTNER INFORMATION		13.	ADDRESS CHANGES ONLY			
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	HARLISE, SARA SCOTT 2106 5TH AVENUE WEST PALMETPO FL 34221 de	128/03 leted by amond	STREET ADDRESS  CITY-ST-ZIP		<u>.                                    </u>		
DOCUMENT # NAME	HARLLEE, JOHN P III	1	STREET ADDRESS	***************************************		רכיו	
STREET ADDRESS	1227 9TH AVENUE WEST BRADENTON FL 34205	CITY-ST-ZIP	04/01/0301069005 **\$28.25				
DOCUMENT # NAME STREET ADDRESS	BOYLSTON, ALICE H 2106 5TH AVENUE WEST		STREET ADDRESS	· ·			
CITY-ST-ZIP	PALMETTO FL 34221		CITY-ST-ZIP				
DOCUMENT # *  NAME  STREET ADDRESS			STREET ADDRESS				
CiTY-ST-ZIP			CITY-ST-ZIP	`,		J	

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

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

DOCUMENT #

CITY-ST-ZIP DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS

NAME\* STREET ADDRESS