

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1983

**LIMITED  
PARTNERSHIP  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

2004 MAR 26 P 1:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A02000000961

1. Name of Limited Partnership

The Lippy Limited Partnership

2. Principal Office Address

6518 Timber Lane

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

same

Zip

33433

Country

USA

Zip

same

Country

8. Name and Address of Current Registered Agent

Name

Stephen R. Lippy

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

6518 Timber Lane

Suite, Apt. #, Etc.

City

Boca Raton FL

State

FL

Zip Code

33433

4. Date Formed or Registered  
To Do Business in Florida

7/16/2002

5. FEI Number

☒ Applied For  
☐ Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

7a. Capital Contributions as shown on Record:

\$100.00

7b. Amount of Capital Contributions in FLORIDA to date:

0.00

**FEES:**

1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is due.

Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Stephen R. Lippy

DATE

11/10/03

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10. Name(s) of General Partner(s)

Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

10a. Registration  
Document Number

Stephen R. Lippy Co.

3915 East Market Street Warren, Ohio 44484

500025786025

01/15/04--01008--003--\*\*88.75

F03 000006331

500025786025

12/29/03--01009--012--\*\*52.50

500025786025

04/01/04--01011--012--\*\*141.25

**REINSTATEMENT**

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Stephen R. Lippy

DATE

11/10/03

Typed or Printed Name of General Partner Signing Form

Stephen R. Lippy, President of Lippy Management

Telephone Number

561-392-5253

CH2E039 (9/03)

2082

# LIBOW & MUSKAT LLP

ATTORNEYS AT LAW

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MIAMI OFFICE:

1385 N.W. 15TH STREET  
MIAMI, FLORIDA 33125-1621

PLEASE REPLY TO

BOCA RATON

December 24, 2003

ARTHUR W. TIFFORD, OF COUNSEL \*\*

◊ ALSO ADMITTED IN NEW YORK, NEW JERSEY AND DISTRICT OF COLUMBIA

‡ ALSO ADMITTED IN NEW YORK AND NEW JERSEY

\* ALSO ADMITTED IN NEW YORK, CALIFORNIA, AND FLORIDA

◻ ALSO ADMITTED IN MICHIGAN

\*\* ALSO ADMITTED IN NEW YORK

Florida Department of State  
Division of Corporations  
Attn: Partnership Section  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: The Lippy Limited Partnership**

Dear Sir/Madam:

~~Enclosed please find a Limited Partnership Reinstatement for the above LP and the \$52.50 filing fee in connection with the above-referenced matter.~~

The principals of the above limited partnership wish to state, in reference to any levying of penalty fees, that their corporate address had changed over the course of the last year, and therefore was not provided with timely notice that a report form had become due. Therefore, we respectfully request that any and all fees be waived in this matter to correct the inconsistencies stated.

Please direct all communications in this matter to the above-referenced address and telephone number.

Very truly yours,

LIBOW & MUSKAT

  
Ron S. Bilu

RSB:ms

Enclosure

F:\Lippy\Correspondence\Florida Dept. of State ltr