

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

1 of 2
0002267 AB

DOCUMENT # A02000001589

1. Entity Name
CONNOLLY ENTERPRISES, LTD.



FILED

03 JUL 25 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2306 NEBRASKA AVE.
FT. PIERCE FL 34950

Mailing Address
2306 NEBRASKA AVE.
FT. PIERCE FL 34950

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3762538

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DUE BY SEPTEMBER 24, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONNOLLY, ROBIN J
2306 NEBRASKA AVE.
FT. PIERCE FL 34950

Name

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

City

FL

Zip Code

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 accept the obligations of registered agent.

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

DATE

9. Capital Contributions as Shown on record. \$1,200,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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 # 102000031964
NAME CONNOLLY INVESTMENT MANAGEMENT, LLC
STREET ADDRESS 2306 NEBRASKA AVE.
CITY-ST-ZIP FT. PIERCE FL 34950

STREET ADDRESS

CITY-ST-ZIP

800021793748
07/25/03--01083--007 **526.25

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS

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:

Robert Connolly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (4/03)

202

FILED

03 JUL 25 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 23, 2003

Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

**Re: Connolly Enterprises, Ltd.
2003 Uniform Business Report**

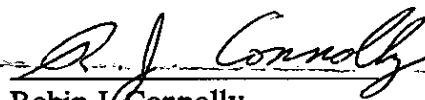
Dear Sir or Madam:

I am writing in response to the 2003 Uniform Business Report I received from your offices. I received this first notice in June 2003. I have been informed that this was actually a second notice. This is the first notice I received and did not receive any prior notices.

Enclosed please find the 2003 Uniform Business Report along with my check in the amount of \$ 526.25

Thank you.

Sincerely,


Robin J. Connolly