

2004 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A03000001832

1. Entity Name
STAN VM LIMITED PARTNERSHIP



Principal Place of Business
3211 S. OCEAN BLVD., #301
HIGHLAND BEACH, FL 33487

Mailing Address
3211 S. OCEAN BLVD., #301
HIGHLAND BEACH, FL 33487

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10282004 REIN-LP CR2E100 (6/04)

4. FEI Number

04-3781717

Applied For

Not Applicable

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

WEISS, STANLEY P
3211 S. OCEAN BLVD., #301
HIGHLAND BEACH, FL 33487

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.

\$3,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

\$3,000,000

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 # G03364900001
NAME STANLEY P. WEISS REVOC. TRUST UAD 5/25/94
STREET ADDRESS 3211 S. OCEAN BLVD., #301
CITY-ST-ZIP HIGHLAND BEACH, FL 33487

STREET ADDRESS

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12/02/04--01048--018 **526.25

REINSTATEMENT

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: X

Signature and Typed or Printed Name of Signing General Partner
S.P. WEISS

X 11-1-04

Date

X 561-278-8302

Daytime Phone #

STAPLE CHECK HERE