


# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0011061 AT

**DOCUMENT # A09228**

1. Entity Name  
**SCHAGRIN WAREHOUSE PARTNERS, LTD.**



FILED

03 FEB 14 AM 9:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business  
**1451 W. CYPRESS CREEK RD., STE 300  
FORT LAUDERDALE FL 33309**

Mailing Address  
**1451 W. CYPRESS CREEK RD., STE 300  
FORT LAUDERDALE FL 33309**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DUE BY MAY 1, 2003

4. FEI Number **59-2007883**

Applied For	
Not Applicable	

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

**6. Name and Address of Current Registered Agent**

**DOODY, DONALD J ESQ**  
**3099 E. COMMERCIAL BLVD., #200**  
**FT LAUDERDALE FL 33308**

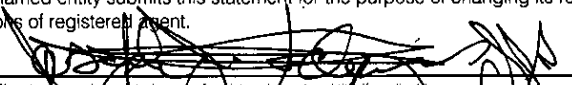
**7. Name and Address of New Registered Agent**

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  DATE **2/12/03**

9. Capital Contributions as Shown on record **\$270,000.00**

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	
DOCUMENT #	SCHAGRIN, JOSEPH J.
NAME	1451 W. CYPRESS CREEK RD
STREET ADDRESS	FT. LAUDERDALE FL 33309
CITY-ST-ZIP	
DOCUMENT #	MILLER, TANFIELD C.
NAME	16 RIDGEWOOD DRIVE
STREET ADDRESS	RYE NY 10580
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	500012561355 02/14/03--01026--002 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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:  DATE **2/12/03** Daytime Phone # **954-928-2824**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CP2E003 (10/02)

SAMPLE CHECK HERE