

2002 UNIFORM BUSINESS REPORT (UBR)

0014051
AT

DOCUMENT # **A09719**

1. Entity Name
BRYAN DAIRY LIMITED

FILED

LF

02 APR 23 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**15500 ROOSEVELT BLVD
SUITE 301
CLEARWATER FL 33760-3410
US**

Mailing Address
**15500 ROOSEVELT BLVD
SUITE 301
CLEARWATER FL 33760-3410
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number
59-2032482

Applied For
Not Applicable

Zip Country Zip Country

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

**RUBIN, LESLIE A.
15201 ROOSEVELT BLVD
STE. #112
CLEARWATER FL 33760**

Name
Street Address (P.O. Box Number is Not Acceptable)
15500 ROOSEVELT BLVD - STE 301
City **CLEARWATER** FL Zip Code **33760**

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.

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

9. Capital Contributions as Shown on record. **\$504,500.00** 10. Amount of Capital Contributions in FLORIDA to date. **1,000.00** 11. **MAKE CHECK PAYABLE TO 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 # NAME STREET ADDRESS CITY-ST-ZIP	A03736 LESLIE A. RUBIN, LIMITED 15201 ROOSEVELT BLVD CLEARWATER FL 33760	STREET ADDRESS CITY-ST-ZIP	15500 ROOSEVELT BLVD - STE 301 CLEARWATER FL 33760
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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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: *Leslie A Rubin* **LESLIE A RUBIN** 4-16-02 727-530-0021
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)