

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0015086 AT

DOCUMENT # A19148

1. Entity Name
COCO PLUM BEACH PARTNERS, LIMITED PARTNERSHIP



Principal Place of Business
P. O. BOX 416
SANIBEL FL 33957

Mailing Address
P. O. BOX 416
SANIBEL FL 33957

FILED

03 APR 10 PM 1:25

SECRETARY OF STATE
TALLAHASSEE



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 62-1277834

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

WORTZEL, ALAN S.
2133 PERIWINKLE WAY
SANIBEL FL 33957

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 obligation of the registered agent.

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

DATE

9. Capital Contributions as Shown on record. \$10,000.00

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 #
NAME
STREET ADDRESS
CITY - ST - ZIP
WORTZEL, ALAN
1875 AROSLEY WAY
SANIBEL FL

STREET ADDRESS

CITY - ST - ZIP

300015651643

DOCUMENT #
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CITY - ST - ZIP

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CITY - ST - ZIP

M THOMAS

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

31 March 2003
Date Daytime Phone #

CR2E003 (10/02)