

2001 UNIFORM BUSINESS REPORT (UBR)

0005621 AF

DOCUMENT # **A23328**

1. Entity Name

FORT DALLAS DEVELOPMENT, LTD.

Principal Place of Business

**10890 N.W. 29TH STREET
MIAMI FL 33172**

Mailing Address

**10890 N.W. 29TH STREET
MIAMI FL 33172**

FILED

01 APR -6 PM 12:23

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2720628

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

**RAMSEY, DAVID III
% WAYNE WITHERS
10890 NW 29TH STREET
MIAMI FL 33172**

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.

SIGNATURE

David Ramsey

(NOTE: Registered Agent signature required when reinstating)

DATE

3-9-2001

9. Capital Contributions
as Shown on record.

\$12,500.00

10. Amount of Capital Contributions
in FLORIDA to date.

**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

**RAMSEY, JOHN DAVID, III
1237 SO. ALHAMBRA CIRCLE
CORAL GABLES FL**

STREET ADDRESS

CITY-ST-ZIP

700003994177--1

04/12/01-01057-033

******176.25 ****176.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

**WITHERS, WAYNE E., JR.
1104 HARDEE ROAD
CORAL GABLES FL**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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:

David Ramsey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-9-2001

Date

(305) 477-0030

Daytime Phone #

CR2E003 (11/00)