

2002 UNIFORM BUSINESS REPORT (UBR)

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

02 MAR 20 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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, 2002

4. FEI Number

59-2720628

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

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

1-7-02

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

DATE

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**WITHERS, WAYNE E., JR.
1104 HARDEE ROAD
CORAL GABLES FL**

STREET ADDRESS

CITY-ST-ZIP

**500005171525--3
-03/27/02--01038--002
****185.00 ****185.00**

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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

1-7-02

Date

305-477-0030

Daytime Phone #

CR2E003 (9/01)

0002154 AV

STAPLE CHECK HERE