

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A24062

1. Entity Name
DERMER INVESTMENTS COMPANY, LTD.



FILED
03 FEB 13 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business % BURTON DERMER 1180 S. OCEAN BLVD., #8E BOCA RATON FL 33432	Mailing Address % BURTON DERMER 1180 S. OCEAN BLVD., #8E BOCA RATON FL 33432
--	--



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 **59-2753124** 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

DERMER INVESTMENTS COMPANY, INC.
% BURTON DERMER
1180 S. OCEAN BLVD., #8E
BOCA RATON FL 33432

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

DATE

9. Capital Contributions as Shown on record. **\$1,996,071.60**

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 #	M43538
NAME	DERMER INVESTMENTS COMPANY, INC.
STREET ADDRESS	% 2601 S. BAYSHORE DR., SUITE 1600
CITY-ST-ZIP	MIAMI FL 33133

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS
CITY-ST-ZIP

900012458299
02/13/03--01026--018 **526.25

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

STREET ADDRESS
CITY-ST-ZIP

CR2E003 (10/02)

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: **BURTON DERMER** 2/13/03 81-361-0962
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #