

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

0006707
AT

02 JUN 21 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # A25063

1. Entity Name

TOBER ASSOCIATES, LTD.

Principal Place of Business

3823 OWENS ROAD
YULEE FL 32097-2145

Mailing Address

3823 OWENS ROAD
YULEE FL 32097-2145

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

13-3420664

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

HENDERSON, J. GROVER
3823 OWENS ROAD
YULEE FL 32097

Name Jerome A. Siegel

Street Address (P.O. Box Number is Not Acceptable)
3823 Owens Rd

City Yulee

FL

Zip Code 32097

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 *Jerome A. Siegel*

6-10-02
DATE

9. Capital Contributions
as Shown on Record.

\$11,000.00

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 # J88450
NAME TOBER CAPITAL CORPORATIO
STREET ADDRESS 3823 OWENS ROAD
CITY-ST-ZIP YULEE FL 32097-2145

STREET ADDRESS

CITY-ST-ZIP

77.00-LP
88.75 Adm

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

800005972968-3
-06/25/02--01053--002
****165.75 ****165.75

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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: *Jerome A. Siegel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-30-02

Date

212-410-7533

Daytime Phone #

(1/01/03) 0006707

STAPLE CHECK HERE