

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A27923**

1. Entity Name

SMITH LAKE SHORES VILLAGE LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 26 PM 1:33

Principal Place of Business

21415 CIVIC CENTER DRIVE
SUITE 303
SOUTHFIELD MI 48076

Mailing Address

21415 CIVIC CENTER DRIVE
SUITE 303
SOUTHFIELD MI 48076-3954



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

38-2851371

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

BRAVERMAN, ARTHUR

7280 WEST PALMETTO PARK ROAD

SUITE 202

BOCA RATON FL 33433

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions

\$360,000.00

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 # **G93019000126**
NAME **RISSMAN INVESTMENT CO.**
STREET ADDRESS **21415 CIVIC CENTER DR.**
CITY - ST - ZIP **SOUTHFIELD MI**

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME **KORMAN, HARRY B**
STREET ADDRESS **1175 NE 125TH ST. SUITE 306**
CITY - ST - ZIP **N. MIAMI BEACH FL**

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME **BRAVERMAN, ARTHUR**
STREET ADDRESS **7280 W. PALMETTO PARK RD. SUITE 202**
CITY - ST - ZIP **BOCA RATON FL**

STREET ADDRESS
CITY - ST - ZIP

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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

Date

Daytime Phone #

CHARGE (111)