

2001 UNIFORM BUSINESS REPORT (UBR)

0018389 AF

DOCUMENT # **A27923**

1. Entity Name

SMITH LAKE SHORES VILLAGE LIMITED PARTNERSHIP

FILED

01 APR -2 PM 12:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**21415 CIVIC CENTER DRIVE
SUITE 303
SOUTHFIELD MI 48076**

Mailing Address

**21415 CIVIC CENTER DRIVE
SUITE 303
SOUTHFIELD MI 48076**

2. Principal Place of Business

9701 SE HWY 25

3. Mailing Address

21411 CIVIC CENTER DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 306

City & State

BELLEVUE FL

City & State

SOUTHFIELD MI

Zip

Country

Zip

Country

48076

4. FEI Number

38-2851371

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BRAVERMAN, ARTHUR
7280 WEST PALMETTO PARK ROAD
SUITE 202
BOCA RATON FL 33433**

7. Name and Address of New Registered Agent

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 as Shown on record.

\$360,000.00

10. Amount of Capital Contributions in FLORIDA to date.

360,000.

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

DOCUMENT # **G00097900258**
NAME **RISSMAN INVESTMENT CO.**
STREET ADDRESS **21415 CIVIC CENTER DR.**
CITY-ST-ZIP **SOUTHFIELD MI**

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

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

21411 CIVIC CENTER DR #306

CITY-ST-ZIP

SOUTHFIELD, MI 48076

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

13/69/01

Date

Daytime Phone #

CR2E003 (11/00)