

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A27923**

1. Entity Name  
**SMITH LAKE SHORES VILLAGE LIMITED PARTNERSHIP**



FILED

03 FEB 19 PM 12:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**9701 S.E. HIGHWAY 25  
BELLEVUE FL 48076**

Mailing Address  
**21411 CIVIC CENTER DR., STE. 306  
SOUTHFIELD MI 48076**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**DUE BY MAY 1, 2003**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*

*12/13/03*  
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 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 # **G00097900258**  
NAME **RISSMAN INVESTMENT CO.**  
STREET ADDRESS **21411 CIVIC CENTER DR., #306**  
CITY-ST-ZIP **SOUTHFIELD MI 48076**

STREET ADDRESS

CITY-ST-ZIP

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

STREET ADDRESS

CITY-ST-ZIP

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

STREET ADDRESS

CITY-ST-ZIP

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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: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*2/12/03* **248-357-888**  
Daytime Phone #

CR2E003 (10/02)