

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0021099
FP

DOCUMENT # A28504

1. Entity Name
6TH AVENUE AND 17TH STREET PARTNERSHIP, LIMITED



FILED
2003 APR -2 PM 2:58

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business
**1826 US #1
VERO BEACH FL 32960**

Mailing Address
**1826 US #1
VERO BEACH FL 32960**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

DUE BY MAY 1, 2003

4. FEI Number **65-0127487**

Applied For
 Not Applicable

City & State

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent

**KUTSCHINSKI, RONALD C.
1826 US HWY #1
VERO BEACH FL 32960**

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

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

9. Capital Contributions as Shown on record. **\$416,000.00**

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	RONALD C. KUTSCHINSKI 1220 INDIAN MOUND TRAIL VERO BEACH FL
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	NORMAN E. MILLER, JR. PO BOX 1946 VERO BEACH FL
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	600015167506
CITY-ST-ZIP	04/02/03--01031--027 **526.25
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: *Ronald C. Kutschinski* **RONALD C. KUTSCHINSKI** 3-31-03 772-978-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (10/02)