

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A29517

1. Entity Name
ALLEN FAMILY LIMITED PARTNERSHIP



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAR -4 PM 5:21



Principal Place of Business
27746 S. DIXIE HWY
NARANJA FL 33032

Mailing Address
27746 S. DIXIE HWY
NARANJA FL 33032

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, 2003

4. FEI Number 65-0165071

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

ALLEN, TRACY
27746 S. DIXIE HWY
NARANJA FL 33032

Name Mary-C Allen

Street Address (P.O. Box Number is Not Acceptable)
27746 S Dixie Hwy

City Naranja

FL

Zip Code 33032

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 *Mary C Allen* Mary C Allen Pres. Marvin & Jean Allen Inc. 2-24-03
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions
as Shown on record. \$731,250.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # L43621
NAME MARVIN & JEAN ALLEN, INC
STREET ADDRESS 27746 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP NARANJA FL 33032

STREET ADDRESS

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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: *Mary C Allen* Mary C Allen Pres Marvin & Jean Allen Inc. 2-24-03 305-246-2232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)