

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A30297**

1. Entity Name

THE CHARLES R. LEE III FIRST FAMILY LIMITED PART

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 13 PM 3:00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**2141 PADDOCK CIRCLE
DUNEDIN FL 34698**

Mailing Address

**2141 PADDOCK CIRCLE
DUNEDIN FL 34698-2426**

2. Principal Place of Business

18105 Woodcreek Pl

3. Mailing Address

18105 Woodcreek Pl.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LUTZ Florida

City & State

LUTZ Florida

4. FEI Number

65-0202404

Applied For

Not Applicable

Zip

33549

Country

U.S.

Zip

33549

Country

U.S.

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LEE, CHARLES R., III
2141 PADDOCK CIRCLE
DUNEDIN FL 34698**

7. Name and Address of New Registered Agent

Name **CHARLES R. LEE III**

Street Address (P.O. Box Number is Not Acceptable)

18105 Woodcreek Pl.

City

LUTZ

FL

Zip Code

33549

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

C R Lee III

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

(NOTE: Registered Agent signature required when reinstating)

4-4-2000

DATE

9. Capital Contributions
as Shown on record.

\$472,750.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$472,750.00

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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

**LEE, CHARLES R., III
2141 PADDOCK CIRCLE
DUNEDIN FL 34698**

13.

ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

18105 Woodcreek Pl.

LUTZ, Florida 33549

DOCUMENT #

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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

CHARLES R. LEE III

4-4-2000

Date

813-909-8826

Daytime Phone #