

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A31669

1. Entity Name
FUTURE PARTNERS, LTD.



FILED

03 JAN 30 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2700 BAYSHORE BLVD., UNITE 519
DUNEDIN FL 34698

Mailing Address
2700 BAYSHORE BLVD., UNITE 519
DUNEDIN FL 34698



2. Principal Place of Business
514 WALDEN CT.

3. Mailing Address
514 WALDEN CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
DUNEDIN, FL

City & State
DUNEDIN, FL

4. FEI Number 59-3072124

Applied For
Not Applicable

Zip Country
34698 USA

Zip Country
34698 USA

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

KEUROGHLIAN, GREGORY H
2700 BAYSHORE BLVD., UNITE 519
DUNEDIN FL 34698

Name
KEUROGHLIAN, GREGORY H
Street Address (P.O. Box Number is Not Acceptable)
514 WALDEN CT
City DUNEDIN FL Zip Code 34698

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 GREGORY H. KEUROGHLIAN GREGORY H. KEUROGHLIAN
Signature, typed or printed name of registered agent and title if applicable. GENERAL PARTNER 01/25/2003
DATE

9. Capital Contributions as Shown on record. \$75,000.00

10. Amount of Capital Contributions in FLORIDA to date. ZERO

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 #
NAME KEUROGHLIAN, GREGORY H
STREET ADDRESS 2700 BAYSHORE BL, #519
CITY-ST-ZIP DUNEDIN FL 34698

STREET ADDRESS 514 WALDEN CT.
CITY-ST-ZIP DUNEDIN, FL 34698

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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: GREGORY H. KEUROGHLIAN GREGORY H. KEUROGHLIAN, 01/25/2003
Signature AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

(727) 736-1123

0021335 FP

CR2E003 (10/02)

STAPLE CHECK HERE