

2002 UNIFORM BUSINESS REPORT (UBR)

0015666
AT

DOCUMENT # **A32177**

1. Entity Name

3F RANCH, LTD.

FILED

02 FEB -7 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

**124 WEST OAK ST
ARCADIA FL 34266**

Mailing Address

**P.O. BOX 2140
ARCADIA FL 34265**

2. Principal Place of Business

128 WEST OAK ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0298502

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

**CARVER, CHARLES H ESQ
101 E. KENNEDY BLVD., #4100
TAMPA FL 33602**

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.

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record.

\$6,005,430.00

10. Amount of Capital Contributions
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **S91096**
NAME **3F RANCH, INC.**
STREET ADDRESS **124 WEST OAK STREET**
CITY-ST-ZIP **ARCADIA FL 34266**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

900004915689--7
-02/13/02--01073--018
******526.25--****526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
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:

STON ADIVER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

HORST HOSKOVIC
ARCADIA GREEN INC.

1/29/02

201-43-6643122400

Date

Daytime Phone #

CR2E003 (9/01)