

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A33202

1. Entity Name
MEC FLORIDA FAMILY LIMITED PARTNERSHIP

FILED

03 MAY -2 PM 6:14

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
18258 LAKE BEND DRIVE
JUPITER FL 33468Mailing Address
18258 LAKE BEND DRIVE
JUPITER FL 33468

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 05-0338888

Applied For

Not Applicable

5. Certificate of Status Cleared ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILVERMAN, THOMAS N ESQUIRE
C/O THOMAS N. SILVERMAN, P.A.
4400 PGA BLVD., SUITE 102
PALM BEACH GARDENS FL 33410

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

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

DATE

9. Capital Contributions

\$530,000.00

as Shown on record

10. Amount of Capital Contributions
in FLORIDA to date.

752,070

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

STREET ADDRESS

CITY-ST-ZIP

CIAVARELLA, MARY E TR
18258 LAKE BEND DRIVE
JUPITER FL

STREET ADDRESS

CITY-ST-ZIP

700017917417
05/02/03--01118--021 **526.25

DOCUMENT #

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CITY-ST-ZIP

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 E Ciavarella TTE

14/28/03

1561575-7898

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

Daytime Phone #