

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

03 JAN 22 AM 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0016635 AT

DOCUMENT # A93000001411

1. Entity Name  
COLEMAN FAMILY PROPERTIES, LTD.



Principal Place of Business  
14289 COUNTRY ESTATE DR.  
WINTER GARDEN FL 34787

Mailing Address  
14289 COUNTRY ESTATE DR.  
WINTER GARDEN FL 34787



2. Principal Place of Business

2111 Lakeside Drive  
Suite, Apt. #, etc.

3. Mailing Address

2111 LAKESIDE DRIVE  
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

FL

City & State

FL

4. FEI Number 59-3215390

Applied For  
Not Applicable

Zip  
32803

Country  
U.S.A.

Zip  
32803

Country  
U.S.A.

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

6. Name and Address of Current Registered Agent

COLEMAN LABORATORIES, INC.  
14289 COUNTRY ESTATE DR.  
WINTER GARDEN FL 34787

7. Name and Address of New Registered Agent

Name  
Coleman Laboratories Inc.  
Street Address (P.O. Box Number is Not Acceptable)

2111 LAKESIDE DRIVE

City  
ORLANDO

FL

Zip Code  
32803

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 Michael A. Coleman, President Michael A. Coleman 1-7-2003  
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$990.00

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

DOCUMENT # P93000087359  
NAME COLEMAN LABORATORIES, INC.  
STREET ADDRESS 14289 COUNTRY ESTATE DR.  
CITY-ST-ZIP WINTER GARDEN FL 34787

13. ADDRESS CHANGES ONLY

STREET ADDRESS 2111 LAKESIDE DRIVE  
CITY-ST-ZIP ORLANDO, FL 32803

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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: Michael A. Coleman 1-7-2003 (407)228.8400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)