

**LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** A94000000245

**1. Entity Name**

MAIORIELLOS LTD



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAR 24 PM 2:36

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

68 Anchor Lane

**3. Mailing Address**

68 Anchor Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**DUE BY MAY 1**

**City & State**

Santa Rosa Beach, FL

**City & State**

Santa Rosa Beach, FL

**4. FEI Number**

59 - 3213060

**Applied For**

Not Applicable

**Zip**  
32459

**Country**

Walton

**Zip**  
32459

**Country**

Walton

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

**7. Name and Address of Current Registered Agent**

**Name**

Maioriello III, Joseph J.

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

68 Anchor Lane

**City**

Santa Rosa Beach

**FL**

**Zip Code**

32459

**DO NOT WRITE  
IN THIS SPACE**

**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  
as Shown on record.**

**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 #**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

MAIORIELLO III, JOSEPH J  
68 Anchor Lane  
Santa Rosa Beach, FL 32459

**STREET ADDRESS**

68 Anchor Lane

**CITY-ST-ZIP**

200032196392  
04/08/04--01018--019 \*\*141.25

**DOCUMENT #**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

MAIORIELLO, LORRAINE T  
68 Anchor Lane  
Santa Rosa Beach, FL 32459

**STREET ADDRESS**

**CITY-ST-ZIP**

**DOCUMENT #**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

MAIORIELLO IV, JOSEPH J  
14 Mine Road  
Oley, PA 19547

**STREET ADDRESS**

**CITY-ST-ZIP**

**DO NOT WRITE  
IN THIS SPACE**

**DOCUMENT #**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

HALLMAN MAIORIELLO CAROLE  
614 Spruce Hill Road  
Ottsville, PA 18942

**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:**

*Joseph J. Maioriello III*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/16/04

850-267-2703

Date

Daytime Phone #

CR2E003B (12/02)

STAPLE CHECK HERE