| | 2002 UNITONIII BUSINESS REPORT (UBR) | | | | | | | | |
|--|--------------------------------------|---|--|--|---|--------------------------------------|--|--|--|
| DOCUMENT # A9400001236 1. Entity Name THE SCHIFANELLA THIRD FAMILY LIMITED PARTNERSHIP | | | | | | | FILED | į | |
| | | | | | | 02 | MAR 20 AM 9: 14 | • | |
| | | | | | | SE | CRETARY OF STATE | • | |
| Principal Place of Business Mailing Address | | | | | <u> </u> | TAL | LAHASSEE, FLORID | A | |
| 1418 NORTH LANE AVE. 1418 NORTH LANE AV JACKSONVILLE FL 32254 JACKSONVILLE FL 322 | | | | ı | | | | | |
| | | | | | | 11021411 | 1 210 (101) 1614 12 1011 1611 1611 1611 1611 16 | BIOL 11070 11000 11170 0:11 1001 | |
| 2. Principal Place of Business 5411 Ortega Boulevard 5411 Or | | | | Address Ortega Boulevard | | | | | |
| Suite, Apt. #, etc. Ste. 7 | | | Suite, Apt. #, etc. Ste. 7 | | | | DUE BY MAY 1, 2002 | | |
| City & State Jacksonville, FL | | | City & State | | | 4. FEI Number | 59-3263189 | Applied For | |
| Zip | IIATITE | Country | Zip | Jacksonville, FL Zip Country | | | | Not Applicable 88.75 Additional | |
| 32210 USA 6. Name and Address of Current | | 32210 | USA | <u>A</u> | | Address of New Registered A | ee Required | | |
| ************************************** | | | | | Name | | | ge | |
| SCHIFANELLA, THOMAS V 1418 NORTH LANE AVENUE | | | | | • | dress (P.O. Box Number | ' ' | | |
| JACKSONVILLE FL 32254 | | | | | 341 | Ortega Boules | ard, Ste /- | | |
| | | | | | City | . 1 1 | FL | Zip Code | |
| 8. The above r | named entity | submits this statement for | the purpose of changing its | register | | onville registered agent, or both | i, in the State of Florida. | 132210 | |
| SIGNATURE | | • | | | | | | | |
| SIGNATURE | | | | | | | DATE | | |
| 9. Capital Contributions as Shown on record. \$481, 140.00 In FLORIDA to date | | | | | hutiana | | | TO DEDT OF STATE | |
| | n record. | | in FLORIDA to d | ate. | | | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR | R FEE INFORMATION | |
| | n record. A G | ENERAL PARTNER T | in FLORIDA to d | ate. | IUST BE R | | 11. MAKE CHECK PAYABLE | R FEE INFORMATION | |
| as Shown or | n record. A G | ENERAL PARTNER T | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. | IUST BE R | | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE | R FEE INFORMATION i tner. | |
| as Shown or 12. DOCUMENT # NAME | A G NOTE: | ENERAL PARTNER T General Partners MA GENERAL PARTNER | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. ITITY M he form | IUST BE R | idment must be filed | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE I to change a general part ADDRESS CHANGES ONLY | R FEE INFORMATION i tner. | |
| as Shown or 12. DOCUMENT # NAME STREET ADDRESS | A G NOTE: SCHIFANE 1418 NOR | ENERAL PARTNER T General Partners MA GENERAL PARTNER | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. ITITY M he form 13. | NUST BE R | idment must be filed | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE I to change a general part ADDRESS CHANGES ONLY Boulevard, Ste 7 | R FEE INFORMATION i tner. | |
| as Shown or 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # | A G NOTE: SCHIFANE 1418 NOR | ENERAL PARTNER T General Partners MA GENERAL PARTNER ELLA, THOMAS V RTH LANE AVE. | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. ITITY M he form 13. STRE | NUST BE R. n; an amen | idment must be filed | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE I to change a general part ADDRESS CHANGES ONLY Boulevard, Ste 7 | R FEE INFORMATION tner. Y | |
| as Shown or 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | A G NOTE: SCHIFANE 1418 NOR | ENERAL PARTNER T General Partners MA GENERAL PARTNER ELLA, THOMAS V RTH LANE AVE. | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. ITITY M he form 13. STRE | NUST BE R. n; an amen EET ADDRESS (-ST-ZIP | 5411 Ortega Jacksonville | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE I to change a general part ADDRESS CHANGES ONLY BOULEvard, Ste 7 c, FL 32210 | ree information iner. y | |
| as Shown or 12. DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # | A G NOTE: SCHIFANE 1418 NOR | ENERAL PARTNER T General Partners MA GENERAL PARTNER ELLA, THOMAS V RTH LANE AVE. | in FLORIDA to d HAT IS A BUSINESS EN Y NOT be changed on t | ate. ITITY M he form 13. STRE CITY STRE | TUST BE R. n; an amen EET ADDRESS /-ST-ZIP EET ADDRESS | 5411 Ortega Jacksonville | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR CTIVE WITH THIS OFFICE to change a general part ADDRESS CHANGES ONLY BOULLevard, Ste 7 c, FL 32210 | FEE INFORMATION in the control of th | |
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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 of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE

STAPLE CHECK HERE

SIGNATURE AND TYPED ORDERINTED NAME OF SIGNING GENERAL PARTNER

3/19/02 (904)381-0662