

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000001272**

1. Entity Name

**FIRST DARTMOUTH COMMERCIAL, LTD.**

**FILED**

**01 SEP 10 PM 12:17**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



Principal Place of Business

**6699 90TH AVE. N.  
PINELLAS PARK FL 34666**

Mailing Address

**6699 90TH AVE. N.  
PINELLAS PARK FL 34666**

2. Principal Place of Business

**742 2ND AVENUE SOUTH**

3. Mailing Address

**742 2ND AVENUE SOUTH**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY SEPTEMBER 26, 2001**

City & State

**ST. PETERSBURG, FL**

City & State

**ST. PETERSBURG, FL**

4. FEI Number

**59-3269035**

Applied For

Not Applicable

Zip

**33701**

Country

**USA**

Zip

**33701**

Country

**USA**

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**RICE, MARTIN E**

**333 THIRD AVE., N., STE 325**

**ST PETERSBURG FL 33701**

7. Name and Address of New Registered Agent

Name

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

**742-2ND AVENUE S.**

City

**ST. PETERSBURG FL**

Zip Code

**33701**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

**\$2,088.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**2,088**

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

DOCUMENT # **P93000027202**  
NAME **DARTMOUTH DEVELOPMENT I, INC.**  
STREET ADDRESS **5901 SUN BOULEVARD, SUITE 100-A**  
CITY-ST-ZIP **ST. PETERSBURG FL 33715**

DOCUMENT # **P94000067463**  
NAME **JORGE ECHART, JR., INC.**  
STREET ADDRESS **5901 SUN BOULEVARD, SUITE 100-A**  
CITY-ST-ZIP **ST. PETERSBURG FL 33715**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **742-2ND AVENUE S.**  
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

STREET ADDRESS **742-2ND AVENUE S.**  
CITY-ST-ZIP **ST. PETERSBURG, FL 33701**

STREET ADDRESS **9000004610539--2**  
CITY-ST-ZIP **-09/25/01--01068--021**  
**\*\*\*\*541.25 \*\*\*\*541.25**

STREET ADDRESS  
CITY-ST-ZIP

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: ✓

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**9/5/01**

**727 541-1100**

0002280 AT

CR2E003 (5/01)

STAPLE CHECK HERE