

# 2002 UNIFORM BUSINESS REPORT (UBR)

0004659 AV

DOCUMENT # A94000001416

1. Entity Name

TASKER FAMILY LIMITED PARTNERSHIP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAR -4 PM 1:41



Principal Place of Business

3157 CRAYTON ROAD  
NAPLES FL 34103

Mailing Address

3157 CRAYTON ROAD  
NAPLES FL 34103

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0536191

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORDON, BRUCE H  
C/O SHUMAKER, LOOP & KENDRICK  
101 EAST KENNEDY BLVD., SUITE 2500  
TAMPA FL 33602

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.

SIGNATURE

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

DATE

9. Capital Contributions  
as Shown on record.

\$9,900,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P95000021948  
NAME TASKER FAMILY CORPORATION  
STREET ADDRESS P.O. BOX 1688 N/A  
CITY-ST-ZIP TOLEDO OH 43603

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # ELWELL, SARA T  
NAME 1135 ASBURY AVENUE  
STREET ADDRESS EVANSTON IL 60202  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

100005073191--7  
-03/08/02--01056--011  
\*\*\*\*526.25 \*\*\*\*526.25

DOCUMENT # TASKER, JEREMIAH B  
NAME 3157 CRAYTON ROAD  
STREET ADDRESS NAPLES FL 33940  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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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:

Jeremiah B. Tasker, Tax Matters Partner 2.28.02 941-649-0239

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)