

7099 3220 0007 2023 4118
2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 APR 29 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A94000001704

1. Entity Name

GREAT POTPOURRI II, LTD.

Principal Place of Business

**601 WEST SEMINOLE BLVD.
SANFORD FL 32771**

Mailing Address

**PMB 354
1982 SR 44
NEW SMYRNA BEACH FL 32168**

2. Principal Place of Business

4525 Myrtle St

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Edgewater FL 32141

City & State

4. FEI Number

59-3290038

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELLEY, EOGHAN N

**601 WEST SEMINOLE BLVD.
SANFORD FL 32771**

7. Name and Address of New Registered Agent

Name

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

4525 Myrtle St

City

Edgewater FL

FL

Zip Code
32141

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.

\$2,561,000.00

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 # **P94000086871**
NAME **GREAT POTPOURRI, INC.**
STREET ADDRESS **601 WEST SEMINOLE BLVD.**
CITY-ST-ZIP **SANFORD FL 32771**

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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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Great Potpourri Inc

EOGHAN N KELLEY, Pres

386 345 0513

CR2E003 (9/01)