

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

192

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DOCUMENT # A95000001144	
1. Entity Name MYERS-DALLAS FAMILY LIMITED PARTNERSHIP	

FILED

2003 SEP -9 PM 12:21

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business P.O. BOX 2473 ROWLETT TX 75030	Mailing Address P.O. BOX 2473 ROWLETT TX 75030
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

DUE BY MAY 1, 2003	
4. FEI Number 75-2611691	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MYERS, MARVIN 360 S. MILITARY TRAIL DEERFIELD BCH. FL 33442

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE <i>Marvin L. Myers</i> MARVIN L. MYERS, GENERAL PARTNER 9/3/03
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$1,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY
STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS
CITY-ST-ZIP
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: <i>Marvin L. Myers</i> MARVIN L. MYERS, GENERAL PARTNER 9/3/03 (903) 769-0616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)

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September 3, 2003

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Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Gentlemen:

Recently I received a second notice of payment due on our partnership, Myers-Dallas Family Limited Partnership, before the end of September 2003.

To the best of my knowledge we never received a previous notice in this regard.

We have had our partnership since 1996 and never missed a due date before.

Enclosed is our check #1261 for \$141.25 in payment of 2003 filing which we trust will be acceptable.

Thank you in advanced for your consideration.

Sincerely,



Marvin L. Myers, General Partner
MYERS-DALLAS FAMILY LIMITED
PARTNERSHIP