

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000001407**

1. Entity Name  
**DROZDOW FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**590 GOLDEN BEACH DRIVE  
GOLDEN BEACH FL 33160**

Mailing Address  
**590 GOLDEN BEACH DRIVE  
GOLDEN BEACH FL 33160**

**FILED**  
**03 APR 16 AM 7:12**  
**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

**RMJH**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0655208**

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

7. Name and Address of New Registered Agent

**DROZDOW FAMILY GP CORP.  
590 GOLDEN BEACH DRIVE  
GOLDEN BEACH FL 33160**

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

*Gilbert Drozdow Managing General Partner 4/9/03*  
DATE

9. Capital Contributions  
as Shown on record.

**\$74,468.55**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$74,468.55**

11. MAKE CHECK PAYABLE TO FL. 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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DROZDOW, GILBERT  
590 GOLDEN BEACH DRIVE  
GOLDEN BEACH FL 33160**

STREET ADDRESS

CITY-ST-ZIP

**300016088653**  
**04/16/03--01010--016 \*\*526.25**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P95000072545  
DROZDOW FAMILY GP CORP.  
590 GOLDEN BEACH DRIVE  
GOLDEN BEACH FL 33160**

STREET ADDRESS

CITY-ST-ZIP

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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:

*Gilbert Drozdow*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)