

# 2001 UNIFORM BUSINESS REPORT (UBR)

0012532 AF

DOCUMENT # A95000001623

1. Entity Name

AKRA INVESTMENTS, LTD.

FILED

01 APR 16 PM 12:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3216 HENDRICKS AVENUE  
JACKSONVILLE FL 32207

Mailing Address

P.O. BOX 5513  
JACKSONVILLE FL 32247

2. Principal Place of Business

3025 Hendricks Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

JACKSONVILLE, FL.

City & State

Zip

32207

Country

Country

4. FEI Number

59-3347291

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CRAWFORD, JOHN R  
225 WATER STREET  
JACKSONVILLE FL 32202

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.

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.

\$819,000.00

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

DOCUMENT #  
NAME AKRA, VINCENT D JR.  
STREET ADDRESS 3216 HENDRICKS AVENUE  
CITY-ST-ZIP JACKSONVILLE FL 32207

DOCUMENT #  
NAME WEINTHALER, MARY A  
STREET ADDRESS 3216 HENDRICKS AVENUE  
CITY-ST-ZIP JACKSONVILLE FL 32207

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 3025 Hendricks Ave.  
CITY-ST-ZIP JACKSONVILLE, Florida 32207

STREET ADDRESS 3025 Hendricks Ave.  
CITY-ST-ZIP JACKSONVILLE, Florida 32207

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS 000004064630--9  
CITY-ST-ZIP -04/24/01--01090--025  
\*\*\*\*\*526.25 \*\*\*\*\*526.25

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 680, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/11/2001

Date

904-778-4424

Daytime Phone #

CR2E003 (11/00)