

# 2000 UNIFORM BUSINESS REPORT (UBR)

*mg*

DOCUMENT # **A95000001825**

1. Entity Name  
**DAYTONA VENTURES LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 OCT -2 AM 11:02



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
3175 COMMERCIAL AVENUE  
#222  
NORTHBROOK IL 60062

Mailing Address  
3175 COMMERCIAL AVENUE  
#222  
NORTHBROOK IL 60062-1915

2. Principal Place of Business

3. Mailing Address

**330 Melvin Drive  
Suite 4  
Northbrook, Illinois 60062**

**330 Melvin Drive  
Suite 4  
Northbrook, Illinois 60062**

4. FEI Number **36-4050362**

Applied For  
Not Applicable

Zip Country  
**USA**

Zip Country  
**USA**

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

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
STE. 105  
TALLAHASSEE FL 32301**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$7,500.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$0.00**

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 # **P95000089463**  
NAME **DAYTONA VENTURES INC.**  
STREET ADDRESS **3175 COMMERCIAL AVE #222**  
CITY - ST - ZIP **NORTHBROOK IL 60062**

STREET ADDRESS **330 Melvin Drive  
Suite 4**  
CITY - ST - ZIP **Northbrook, Illinois 60062**

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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: *Robert J. Seigel, President of General Partner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E003 (9/99)