

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

03 FEB 21 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A95000001826

1. Entity Name  
**SMITHCON FAMILY INVESTMENTS, LTD.**



Principal Place of Business  
**1161 SPANISH RIVER RD.  
BOCA RATON, FL 33432**

Mailing Address  
**1161 SPANISH RIVER RD.  
BOCA RATON, FL 33432**

2. Principal Place of Business

**1806 Sabal Palm Circle**  
Suite, Apt. #, etc.

3. Mailing Address

**1350 E. Newport Ctr Dr**  
Suite, Apt. #, etc.  
**201**



DUE BY MAY 1 2003

City & State

City & State

**Deerfield Beach, FL**

4. FEI Number

**65-0627511**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33442**

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301**

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

Signature, typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions

as Shown on record. **\$6,569,663.25**

10. Amount of Capital Contributions

In FLORIDA to date.

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

DOCUMENT # **P95000085960**  
NAME **SMITHCON INVESTMENTS, INC.**  
STREET ADDRESS **1161 SPANISH RIVER ROAD**  
CITY - ST - ZIP **BOCA RATON, FL 33432**

DOCUMENT #  
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CITY - ST - ZIP

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CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

**1806 Sabal Palm Circle**

CITY - ST - ZIP

**Boca Raton, FL 33432**

STREET ADDRESS

CITY - ST - ZIP

**500012873795**

**02/21/03--01008--009 \*\*526.00**

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:

**Donald L. Smith, Jr.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*President of General Partner*

**2/17/03**

Date

**954-469-1500**

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE