

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 MAR 20 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A95 00000 1935**

1. Entity Name **DiFabrizio Family Enterprises, Ltd.**

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4921 Rivershore Drive

3. Mailing Address
4921 Rivershore Drive

DUE BY MAY 1

City & State
Tampa, Florida 33603

City & State
Tampa, Florida 33603

4. FEI Number
59-3350136

Applied For
Not Applicable

Zip Country

Zip Country

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Ernest DiFabrizio**

Street Address (P.O. Box Number is Not Acceptable)

4921 Rivershore Drive

City **Tampa, Florida** **FL** Zip Code **33603**

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.

DATE

9. Capital Contributions
as Shown on record. **10,000,000.00**

10. Amount of Capital Contributions
in FLORIDA to date. **4,070,979**

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
STREET ADDRESS
CITY-ST-ZIP
**DiFabrizio, Ernest
4921 Rivershore Drive
Tampa, Florida 33603**

STREET ADDRESS

CITY-ST-ZIP

800005146968--4

03/22/02-01054-029

*******526.25 *****526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**DiFabrizio, Lola M.
4921 Rivershore Drive
Tampa, Florida 33603**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**DiFabrizio, Gerald E.
4921 Rivershore Drive
Tampa, Florida 33603**

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**DiFabrizio, Carolyn A.
4921 Rivershore Drive
Tampa, Florida 33603**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
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: *Ernest DiFabrizio*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mar 18-02

Date

Daytime Phone #

STAPLE CHECK HERE

CR2E003B (12/01)