

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0011241
AT

DOCUMENT # A95000002028

1. Entity Name

EPY, LTD.

02 APR -3 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1871 N.W. 93RD WAY
PLANTATION FL 33322

Mailing Address

1871 N.W. 93RD WAY
PLANTATION FL 33322



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

65-0631119

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

TEKEL, JUDITH ANN
1871 NW 93RD WAY
PLANTATION FL 33322

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.

DATE

9. Capital Contributions
as Shown on record.

\$288,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
TEKEL, JUDITH ANN
1871 NW 93RD WAY
PLANTATION FL 33322

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
EPY, JERALD DAVID
11356 BOCA WOODS LANE
BOCA RATON FL 33428

STREET ADDRESS

CITY-ST-ZIP

100005237351--0

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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:

Judith Ann Tekel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/29/02 954-792-6700
Date Daytime Phone #

CR2E003 (9/01)