

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000000794**

1. Entity Name
GWINNETT/CAROLINA, LTD.

Principal Place of Business
**5858 CENTRAL AVE.
ST. PETERSBURG FL 33707**

Mailing Address
**5858 CENTRAL AVE.
ST. PETERSBURG FL 33707-1728**

FILED
00 APR 27 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address
c/o The Sembler Company

Suite, Apt. #, etc.

Suite, Apt. #, etc.
PO Box 41847

City & State

City & State
St. Petersburg, FL

4. FEI Number **59-3398078**

Applied For
Not Applicable

Zip Country

Zip Country
33743-1847

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

**SHER, CRAIG H
5858 CENTRAL AVE.
ST. PETERSBURG FL 33707**

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. **\$295,950.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$98.65**

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 # **P96000003312**
NAME **SEMBLER RETAIL, INC.**
STREET ADDRESS **5858 CENTRAL AVE.**
CITY - ST - ZIP **ST. PETERSBURG FL 33707**

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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: *Craig H. Sher* **SIGNATURE REQUIRED** Craig H. Sher, President 4/26/2000 727-384-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Sembler Retail, Inc. Daytime Phone #

CR2E003 (9/99)