

2001 UNIFORM BUSINESS REPORT (UBR)

0000269 AF

DOCUMENT # **A96000001030**

1. Entity Name

SRH I INVESTORS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 FEB 16 PM 1:15

Principal Place of Business
**222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**

Mailing Address
**222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**



2. Principal Place of Business

3. Mailing Address

Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410

Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410

DO NOT WRITE IN THIS SPACE

MJH

4. FEI Number

65-0682658

Applied For

Not Applicable

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

**REGSERV CORP.
222 LAKEVIEW AVE., 17TH FLOOR
WEST PALM BEACH FL 33401**

**REGSERV CORP.
Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

FL Zip Code

8. By: 

By: **Lawrence B. Juran, President**

is registered office or registered agent, or both, in the State of Florida.

(E: Registered Agent signature required when reinstating)

DATE

1/23/01

9. Capital Contributions
as Shown on record.

\$1,000.00

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 # **A96000001029**
NAME **SRH I MEDICAL EQUITY INVESTORS, LTD.**
STREET ADDRESS **222 LAKEVIEW AVE., 17TH FLOOR**
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

STREET ADDRESS **Gardens Corporate Center**
CITY-ST-ZIP **3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

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CITY-ST-ZIP

STREET ADDRESS
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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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Patrick I. DiSalvo
Vice President

1/30/01 (541) 630-5055
Date Daytime Phone #

CR2E003 (11/00)