

# 2001 UNIFORM BUSINESS REPORT (UBR)

0010084 AF

DOCUMENT # **A96000001461**

1. Entity Name

**SEMBLER FAMILY PARTNERSHIP #13, LTD.**

AND  
FILED  
01 APR 30 PM 3:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>5858 CENTRAL AVE. ST. PETERSBURG FL 33707</b>	Mailing Address <b>% THE SEMBLER COMPANY P.O. BOX 41847 ST. PETERSBURG FL 33743-1847</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

Zip	Country	Zip	Country
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4. FEI Number <b>59-3399813</b>	Applied For Not Applicable
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6. Name and Address of Current Registered Agent  <b>SHER, CRAIG H 5858 CENTRAL AVE. ST. PETERSBURG FL 33707</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>
DATE _____

9. Capital Contributions as Shown on record. <b>\$916,740.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>\$99.00</b>	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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	<b>P96000003312 SEMBLER RETAIL, INC. 5858 CENTRAL AVE. ST. PETERSBURG FL 33707</b>	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	<b>100004102621--1 -05/01/01--01078--019 ***150.00 ***150.00</b>
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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:	4/26/01	727-384-6000
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	<small>Date</small>	<small>Daytime Phone #</small>

Craig H. Sher, President, Sembler Retail, Inc.,

CR2E003 (11/00)