

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

FILED

02 MAR -6 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000001593

1. Entity Name

The Braly-Townsend Family Partnership, Ltd

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4332 - 44th St S

Suite, Apt. #, etc.

3. Mailing Address

4332-44th St S

Suite, Apt. #, etc.

DUE BY MAY 1

City & State

St Petersburg FL

Zip 33711

Country

City & State

St Petersburg FL

Zip 33711

Country

4. FEI Number

65-0694358

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Roger G. Townsend, Jr.

Street Address (Post Box Number and Room Number)

4332 44th St. South

City

St. Petersburg

FL

Zip 33711

**DO NOT WRITE
IN THIS SPACE**

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

101,682.00

10. Amount of Capital Contributions
in FLORIDA to date.

101,682.00

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

Roger G. Townsend, Jr.
4332-44th St S
St Petersburg FL 33711

STREET ADDRESS

CITY - ST - ZIP

600005108916--1

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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), 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: *X Roger Townsend*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3X2-2

X7278673605
Daytime Phone #

CR2E003B (12/01)