

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM****Secretary of State****DOCUMENT # A96000001969**1. Entity Name
THE JLS FAMILY PARTNERSHIP, LTD.Principal Place of Business
5741 BEE RIDGE RD., STE. 320
SARASOTA FL 34233
Mailing Address
8068 SANDERLING RD.
SARASOTA FL 34242

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number
65-0703780
Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SACK JEFFREY B
8068 SANDERLING RD.
SARASOTA FL 34242 US

7. Name and Address of New Registered Agent

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 **JEFFREY SACK****04/30/2001**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record. 7,000.0010. Amount of Capital Contributions
in FLORIDA to date. 7,000.00**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 JLS INVESTMENTS OF SARASOTA, INC.
STREET ADDRESS 8068 SANDERLING RD.
CITY-ST-ZIP SARASOTA FL 34242DOCUMENT #
NAME
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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

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: **Jeffrey Sack**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

pres 04/30/2001

Date

Daytime Phone #

CR2E003 (11/00)