

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000002116

1. Entity Name

J & R GRANDCHILDREN, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -1 PM 1:55

Principal Place of Business

OCEAN REEF CLUB
33 CARDINAL LANE
KEY LARGO FL 33037

Mailing Address

% GREGORY M VASEL CPA/SCHIAVONE CONSTRUCT
1600 PATERSON PLANK RD.
SECAUCUS NJ 07094-4019



2. Principal Place of Business

Suite, Apt. #, etc. -

City & State

Zip

Country

3. Mailing Address C/O Gregory M. Vasel

Schiavone Construction Co.

Suite, Apt. #, etc.

150 Meadowlands Parkway, 3rd Fl.

City & State

Secaucus NJ

Zip

07094

Country

USA

4. FEI Number

04-4246683

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHIAVONE, JEAN R

OCEAN REEF CLUB

33 CARDINAL LANE

KEY LARGO FL 33037

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

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.

\$350,000.00

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 #

G96313900052

NAME

THE JEAN R. SCHIAVONE LIVING TRUST

STREET ADDRESS

33 CARDINAL LANE

CITY - ST - ZIP

KEY LARGO FL 33037

STREET ADDRESS

CITY - ST - ZIP

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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:

JEAN R. SCHIAVONE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone

1/28/00

801-867-5070

627111