


# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

FILED

03 APR 11 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A96000002321</b> 1. Entity Name <b>THE FELDBAUM FAMILY PARTNERSHIP, LTD.</b>	
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Principal Place of Business 385 N. POINT RD. MERIDIAN #803 OSPREY, FL 34229	Mailing Address 385 N. POINT RD. MERIDIAN #803 OSPREY, FL 34229
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2. Principal Place of Business	3. Mailing Address	DUE BY MAY 1, 2003	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number <b>65-0721246</b>	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
City & State	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent  <b>FELDBAUM, GERALDINE</b> 385 N. POINT RD. MERIDIAN #803 OSPREY, FL 34229	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and date if applicable.

9. Capital Contributions as Shown on record. <b>\$585,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	MAKE CHECK PAYABLE TO FL. 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 <b>FELDBAUM, GERALDINE TRUSTEE</b> STREET ADDRESS <b>385 N. POINT RD., MERIDIAN #803</b> CITY-ST-ZIP <b>OSPREY, FL 34229</b>	STREET ADDRESS CITY-ST-ZIP
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CFR2E003 (10/02)

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: *Geraldine Feldbaum* **Geraldine Feldbaum, Trustee** 4-8-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #