

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000000759

1. Entity Name  
JOROMA, LTD.



FILED

03 MAR 14 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
12043 S.E. BURKDALE RUN  
P.O. BOX 4309  
TEQUESTA FL 33469

Mailing Address  
C/O PRINCE P.O. BOX 140  
CHUCKEY TN 37641-0140

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2003

4. FEI Number 65-0742554

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PORTER, MAURICE D  
12043 S.E. BURKDALE RUN  
TEQUESTA FL 33469

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. \$4,900.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PORTER, MAURICE D  
12043 S.E. BURKDALE RUN  
TEQUESTA FL 33469

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

M THOMAS

4. 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 record owner and am empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

*Joroma Ltd Maurice Porter Gen Pts.* 3-10-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date 566-746-760

CR2E003 (10/02)