LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001343

1. Entity Name
Ethel H. Levy Family Partnership, LTD.

FILED
03 FEB -3 PM 12: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
700011595665
01/31/03--01074--005 **526.25

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
401 S. W. 88th Terrace	401 S. W. 88th Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Gainesville, Florida	City & State: Gainesville, Florida
Zip: 32607-1452 / Country:	Zip: 32607-1452 / Country: USA

DUE BY MAY 1

4. FEI Number: 59-3463512 — Applied For / Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: LEVY, NORMAN S.
Street Address (P.O. Box Number is Not Acceptable): 401 S. W. 88TH TERRACE
City: GAINESVILLE FL Zip Code: 32607-1452

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 of a member of registered agent and title if applicable

9. Capital Contributions as Shown on Record	10. Amount of Capital Contributions in FLORIDA to date	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
2,500,000.00		

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	LEVY, NORMAN S. 401 S.W. 88TH TERRACE GAINESVILLE, FL 32607	STREET ADDRESS / CITY-ST-ZIP	
DOCUMENT # / NAME / STREET ADDRESS / CITY-ST-ZIP	LEVY, RHODA S 15311 N.E. 173RD STREET WOODENVILLE, WA 98072	STREET ADDRESS / CITY-ST-ZIP	
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STAPLE CHECK HERE

CR2E003B (12/02)

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 complete 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 trustee or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: NORMAN S. LEVY GENERAL PARTNER 1/29/2003 (352) 331-2020
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING GENERAL PARTNER — DATE — Daytime Phone #