

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0016000 AT

DOCUMENT # A97000001486

1. Entity Name
THE ROSILE FAMILY LIMITED PARTNERSHIP



FILED

03 MAY -2 PM 7:50

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
2918 ALCAZAR TR.
NORTH PORT FL 34287

Mailing Address
2918 ALCAZAR TR.
NORTH PORT FL 34287



2. Principal Place of Business
20020 VETERAN'S HWY
Suite, Apt. #, etc. 2

3. Mailing Address
20020 VETERAN'S HWY
Suite, Apt. #, etc. 2

DUE BY MAY 1, 2003

City & State
Port Charlotte FL

City & State
Port Charlotte FL

Zip 33954 **Country** USA

Zip 33954 **Country** USA

4. FEI Number 65-0767243

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HERKO, ANDREW T
2918 ALCAZAR TR.
NORTH PORT FL 34287

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
20020 VETERAN'S HWY #2

City Port Charlotte FL Zip Code 33954

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 Andrew T Herko DATE 4/25/03

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

9. Capital Contributions as Shown on record. \$500.00

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 ROSILE-HERKO, JENNIFER S	STREET ADDRESS	20020 VETERAN'S HWY #2
	STREET ADDRESS 2918 ALCAZAR TR.		
	CITY-ST-ZIP NORTH PORT FL 34287	CITY-ST-ZIP	Port Charlotte FL 33954
DOCUMENT #	NAME HERKO, ANDREW T	STREET ADDRESS	20020 VETERAN'S HWY #2
	STREET ADDRESS 2918 ALCAZAR TR.		
	CITY-ST-ZIP NORTH PORT FL 34287	CITY-ST-ZIP	Port Charlotte FL 33954
DOCUMENT #	NAME	STREET ADDRESS	
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DOCUMENT #	NAME	STREET ADDRESS	200017874267
	STREET ADDRESS		05/02/03--01046--008 #141.25
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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: SIGNATURE REQUIRED DATE 4/25/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)