

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A91000001515**

1. Entity Name

**THE ANNE BECKER REAL ESTATE LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 28 AM 3:05

Principal Place of Business

Mailing Address

**2631-B NW 41st Street  
Gainesville, FL 32606**

**2631-B NW 41st Street  
Gainesville, FL 32606**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**593449185**

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

**DAVIS, JOHN A JR.  
2631-N.W. 41ST STREET, SUITE B  
GAINESVILLE FL 32606**

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.

**\$ 122,300.00**

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 #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**BECKER, ANNE  
2631 N.W. 41ST STREET, SUITE B  
GAINESVILLE FL 32606**

STREET ADDRESS  
CITY - ST - ZIP

**400003272384--9  
-05/31/00--01075--017  
\*\*\*\*526.25 \*\*\*\*526.25**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DAVIS, JOHN A JR.  
2631 N.W. 41ST STREET, SUITE B  
GAINESVILLE FL 32606**

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Driving Phone #