

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002302

1. Entity Name
**THE HEYSEK FAMILY LIMITED PARTNERSHIP
AGREEMENT**



2. Principal Place of Business
3009 FOREST CLUB DRIVE
PLANT CITY, FL 33567

Mailing Address
3009 FOREST CLUB DRIVE
PLANT CITY, FL 33567

2. Principal Place of Business
3203 Polo Place
Suite, Apt. #, etc.

3. Mailing Address
3203 Polo Place
Suite, Apt. #, etc.

City & State
Plant City, FL

City & State
Plant City, FL

4. FEI Number
59-3478039

Applied For
Not Applicable

Zip
33567

Country

Zip
33567

Country

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

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

HEYSEK, RANDY
3203 POLO PLACE
PLANT CITY, FL 33567

7. Name and Address of New Registered Agent

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. \$2,500.00

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
STREET ADDRESS
CITY - ST - ZIP
HEYSEK, RANDY TRUSTEE
3203 POLO PLACE
PLANT CITY, FL 33567

STREET ADDRESS

CITY - ST - ZIP

000018450310
05/07/03--01047--005 **141

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STREET ADDRESS

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 520, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Randy Heysek

4/30/03

813-754-2119

Date

Daytime Phone #

FILED

03 MAY -7 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



STAPLE CHECK HERE

CR0303 (10/02)