

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0000399
AT

DOCUMENT # A97000002325



FILED

03 APR 22 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Entity Name

JAMES R. LOWRY, SR. FAMILY LIMITED PARTNERSHIP,
LLLP

Principal Place of Business

36 W. ILLIANA STREET
ORLANDO FL 32806

Mailing Address

36 W. ILLIANA STREET
ORLANDO FL 32806

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3478618

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOWRY, H. CLAY
36 W. ILLIANA STREET
ORLANDO FL 32806

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.

\$2,475,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

1,000,000

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

DOCUMENT #
NAME LOWRY, JAMES R TRUSTEE
STREET ADDRESS 36 W. ILLIANA STREET
CITY-ST-ZIP ORLANDO FL 32806

DOCUMENT #
NAME LOWRY, JOSEPH EDWARD TRUSTEE
STREET ADDRESS 36 W. ILLIANA STREET
CITY-ST-ZIP ORLANDO FL 32806

DOCUMENT #
NAME LOWRY, H. CLAY TRUSTEE
STREET ADDRESS 36 W. ILLIANA STREET
CITY-ST-ZIP ORLANDO FL 32806

DOCUMENT #
NAME MCKINNEY, MARY LANE TRUSTEE
STREET ADDRESS 36 W. ILLIANA STREET
CITY-ST-ZIP ORLANDO FL 32806

DOCUMENT #
NAME LOWRY, H. CLAY
STREET ADDRESS 8015 LANDGROVE COURT
CITY-ST-ZIP ORLANDO FL 32819

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/17/03 (407) 206-4000

Date

Daytime Phone #

CR2E003 (10/02)