

2000 UNIFORM BUSINESS REPORT (UBR)

081400

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DOCUMENT # A97000002580

1. Entity Name
TERRY41 LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 22 AM 10:02

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DO NOT WRITE IN THIS SPACE

Principal Place of Business
25161 RIDGE OAK DRIVE
BONITA SPRINGS FL 34134

Mailing Address
25161 RIDGE OAK DRIVE
BONITA SPRINGS FL 34134

2. Principal Place of Business

3. Mailing Address

27160 BAY LANDING DR 27160 BAY LANDING DR
Suite, Apt. #, etc.

City & State
BONITA SPRINGS FL

City & State
BONITA SPRINGS FL

4. FEI Number 65-0796776

Applied For
Not Applicable

Zip
34135

Country
US

Zip
34135

Country
US

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

CRONIN, DENNIS P ESQ
BOND, SCHOENECK & KING, P.A. TE 107
1167 THIRD STREET SOUTH, STE. 107
NAPLES, FL 34102-7098

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. \$2,000,000.00

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 # P97000100233
NAME KOSUL, INC.
STREET ADDRESS 25161 RIDGE OAK DRIVE
CITY-ST-ZIP BONITA SPRINGS FL 34134

STREET ADDRESS
CITY-ST-ZIP 000003380360--2
-09/01/00--01063--003
****526.25 ****526.25

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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 620, Florida Statutes.

SIGNATURE: STEPHANIE *[Signature]* PRES OF KOSUL INC - GENERAL PARTNER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

8/08/00 941 9475900
Date Daytime Phone #

CR2E003 (5/00)