

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000000034

1. Entity Name

WEISSMAN FAMILY LIMITED PARTNERSHIP

Principal Place of Business  
1535 BUTTONBUSH CIRCLE  
PALM CITY FL 34990

Mailing Address  
1535 BUTTONBUSH CIRCLE  
PALM CITY FL 34990-8083

FILED

00 JAN 21 PM 12:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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

04-3396675

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

WEISSMAN, ROBERT J  
1535 BUTTONBUSH CIRCLE  
PALM CITY FL 34990

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.

\$5,000.00

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 #  
NAME WEISSMAN, ROBERT J  
STREET ADDRESS 1535 BUTTONBUSH CIRCLE  
CITY - ST - ZIP PALM CITY FL 34990

STREET ADDRESS

CITY - ST - ZIP

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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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Robert J. Weissman  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
ROBERT J. WEISSMAN Gen. Ptn.

JAN 10, 2000

Date

(561) 336-3576

Daytime Phone #