

2002 UNIFORM BUSINESS REPORT (UBR)

0015235 AT

DOCUMENT # A98000000196

1. Entity Name

EDGAR-PETTEWAY FAMILY LIMITED PARTNERSHIP

FILED

02 MAY -2 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

640 N.W. 10TH STREET
CRYSTAL RIVER FL 34429

Mailing Address

6214 BLACKBERRY LANE
BRADENTON FL 34202-2008

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

65-0810242

Applied For

Not Applicable

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

REDMOND, SUSAN
6214 BLACKBERRY LN
BRADENTON FL 34202-2008

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.

DATE

9. Capital Contributions

\$80,000.00

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	STREET ADDRESS	CITY-ST-ZIP
	REDMOND, SUSAN	6214 BLACKBERRY LN	BRADENTON FL 34202-2008
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
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STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	300005555459--7
CITY-ST-ZIP	-05/16/02--01068--015
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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:

Susan Redmond RED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/30/02 941 955 1234
Date Daytime Phone #

CR2E003 (9/01)