

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000000569**

1. Entity Name

SKIBO FAMILY LIMITED PARTNERSHIP

Principal Place of Business

Mailing Address

**2265 ALBA WAY
DEERFIELD FL 33442**

**2265 ALBA WAY
DEERFIELD FL 33442**

FILED

02 APR 26 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

15 Ave de La Mer

3. Mailing Address

15 Ave de La Mer

Suite, Apt. #, etc.

2502

Suite, Apt. #, etc.

2502

City & State

Palm Coast, Florida.

City & State

Palm Coast, Florida

Zip

32137

Country

U.S.A

Zip

32137

Country

USA

DUE BY MAY 1, 2002

4. FEI Number

65-0845491

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SKIBO, CHARLES M

2265 ALBA WAY

DEERFIELD FL 33442

7. Name and Address of New Registered Agent

Name

SKIBO, Charles M.

Street Address (P.O. Box Number is Not Acceptable)

15 Ave de La Mer

2502

City

Palm Coast, Fla.

FL

Zip Code

32137

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.

Charles M. Skibo

4/19/02

DATE

9. Capital Contributions
as Shown on record.

\$10,000.00

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

DOCUMENT # **V17538**
NAME **STRATEGIC ENTERPRISES AND COMMUNICATIONS I**
STREET ADDRESS **2265 ALBA WAY**
CITY-ST-ZIP **DEERFIELD FL 33442**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

15 Ave de La Mer, # 2502

CITY-ST-ZIP

Palm Coast, Fla. 32137

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

**100005450591--1
-05/03/02--01075--023
****158.75 ****158.75**

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:

Charles M. Skibo

4/19/02 386/447-7063

Date

Daytime Phone #

0003746 AV

CR2E003 (9/01)