

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

11-2100

DOCUMENT # **A98000000974**

1. Entity Name
R & C DEFERRARI FAMILY LIMITED PARTNERSHIP II

00 APR -4 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/4/19

Principal Place of Business
**121 HARBOR DRIVE
PALM HARBOR FL 34683**

Mailing Address
**121 HARBOR DRIVE
PALM HARBOR FL 34683-5404**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3514844		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
GORDON, BRUCE H C/O SHUMAKER, LOOP & KENDRICK, LLP 102 EAST KENNEDY BLVD., SUITE 2800 TAMPA FL 33602				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE _____	
9. Capital Contributions as Shown on record. \$10,000.00		10. Amount of Capital Contributions in FLORIDA to date. 100		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 #	P98000012326		STREET ADDRESS		
NAME	R & C DEFERRARI MANAGEMENT, INC.		CITY - ST - ZIP	200003217252--8	
STREET ADDRESS	121 HARBOR DRIVE			04/21/00 01002 011	
CITY - ST - ZIP	PALM HARBOR FL 34683			****141.25 ****141.25	
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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: **SIGNATURE REQUIRED** 3/7/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date **727-787-4119**

CR2E003 (9/99)