

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000001119

1. Entity Name
SCHWARTZ INVESTMENTS OF SARASOTA, LTD.



FILED

03 MAY -1 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
1211 GULF OF MEXICO DRIVE, #512
LONGBOAT KEY F3 34228

Mailing Address
1211 GULF OF MEXICO DRIVE, #512
LONGBOAT KEY F3 34228

2. Principal Place of Business

3. Mailing Address

1211 Gulf of Mexico Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

512

City & State

City & State

Longboat Key, Flo.

Zip

Country

Zip

34228

Country

U.S.A.

DUE BY MAY 1, 2003

4. FEI Number 65-0834519

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

DARJELL, ROBERT W
2033 MAIN STREET, SUITE 400
SARASOTA FL 34237

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

B. Robert Schwartz

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$980,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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
SCHWARTZ, B. ROBERT
1211 GULF OF MEXICO DRIVE, #512
LONGBOAT KEY F3 34228

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SCHWARTZ, MARILYN W
1211 GULF OF MEXICO DRIVE, #512
LONGBOAT KEY F3 34228

STREET ADDRESS

CITY-ST-ZIP

200016323042
04/18/03-01044-018 **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:

SIGNATURE REQUIRED

B. Robert Schwartz

4/28/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

0015651 AT

CR2E003 (10/02)

STAPLE CHECK HERE