

2002 UNIFORM BUSINESS REPORT (UBR)

0012725 AT

DOCUMENT# A98000001621

1. Entity Name
DAWSON RAY, LTD.

FILED

02 JAN 28 PM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
3601 CARLTON PLACE
BOCA RATON FL 33496

Mailing Address
3601 CARLTON PLACE
BOCA RATON FL 33496

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
City & State

4. FEI Number 65-0866385
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

DAWSON RAY, INC.
3601 CARLTON PLACE
BOCA RATON FL 33496

7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. \$1,000,000.00
10. Amount of Capital Contributions in FLORIDA to date. \$1,000,000.00
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 # P98000058767
NAME DAWSON RAY, INC.
STREET ADDRESS 3601 CARLTON PLACE
CITY-ST-ZIP BOCA RATON FL 33496

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP

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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: *Dawson Ray, Inc.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Date 1-10-02 Daytime Phone # 561-994-4863

CR2E003 (9/01)