

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98-2018

1. Entity Name

FANNIE ZIMMERMAN FAMILY LIMITED PARTNERSHIP

Principal Place of Business

90 Mrs. FANNIE ZIMMERMAN
3800 SOUTH OCEAN DRIVE
HOLLYWOOD, FL 33019

Mailing Address

90 Mrs. FANNIE ZIMMERMAN
3800 SOUTH OCEAN DRIVE
HOLLYWOOD, FL 33019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

105-1040164

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ZIMMERMAN, FANNIE MRS.
3800 SOUTH OCEAN DRIVE
HOLLYWOOD, FL 33019

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

1,000 -

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 #
NAME ZIMMERMAN, FANNIE
STREET ADDRESS 3800 SOUTH OCEAN DRIVE
CITY-ST-ZIP HOLLYWOOD FL 33019

13. ADDRESS CHANGES ONLY

STREET ADDRESS

100003819511--0

CITY-ST-ZIP

03/08/01 01110-001

***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:

FANNIE ZIMMERMAN (FANNIE ZIMMERMAN)

954-455-8890

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)