

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000288

1. Entity Name

J & S GERSON FAMILY LIMITED PARTNERSHIP

Principal Place of Business

11482 VICTORIA CIRCLE  
BOYNTON BEACH FL 33437

Mailing Address

11482 VICTORIA CIRCLE  
BOYNTON BEACH FL 33437-1838

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

GERSON, JEROME R  
11482 VICTORIA CIRCLE  
BOYNTON BEACH FL 33437

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.

\$2,110,228.00

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 # P99000008786  
NAME JSG REALTY CORP.  
STREET ADDRESS 11482 VICTORIA CIRCLE  
CITY - ST - ZIP BOYNTON BEACH FL 33437

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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08/02/00 01010-020  
\*\*\*\*526.25 \*\*\*\*526.25

Never received  
1st notice

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

JEROME R GERSON

Date

Daytime Phone #

561-738 9076

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JUL 26 PM 1:25



DO NOT WRITE IN THIS SPACE

CR2E003 (9/99)