

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000589

1. Entity Name

FRANKLIN C. COMINS FAMILY LIMITED PARTNERSHIP

Principal Place of Business

% STEVEN H. KANE, ESQUIRE  
557 NO. WYMORE ROAD, SUITE 100  
MAITLAND FL 32751

Mailing Address

% STEVEN H. KANE, ESQUIRE  
557 NO. WYMORE ROAD, SUITE 100  
MAITLAND FL 32751-4256

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 FEB 18 PM 12:44



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3566652

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

7. Name and Address of New Registered Agent

KANE, STEVEN H  
1061 MAITLAND CENTER COMMONS  
MAITLAND FL 32808

Name

Steven H. Kane

Street Address (P.O. Box Number is Not Acceptable)

557 North Wymore Road

Suite 100

City

Maitland

FL

Zip Code

32751

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

*Steven H. Kane*

2/15/00

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.

\$1,248,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,248,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #  
NAME FRANKLIN C. COMINS, TRUSTEE  
STREET ADDRESS 4181 PLAYER CIRCLE  
CITY - ST - ZIP ORLANDO FL 32808

STREET ADDRESS 1700 Bronson Way  
Bronson Place, Apartment #263  
CITY - ST - ZIP Kalamazoo, Michigan 49009

DOCUMENT #  
NAME FRANCES M. COMINS, TRUSTEE  
STREET ADDRESS 4181 PLAYER CIRCLE  
CITY - ST - ZIP ORLANDO FL 32808

STREET ADDRESS 1700 Bronson Way  
Bronson Place, Apartment #263  
CITY - ST - ZIP Kalamazoo, Michigan 49009

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS  
CITY - ST - ZIP  
*mf 2/28/00*

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS  
CITY - ST - ZIP  
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DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS  
CITY - ST - ZIP

13. 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:

*Franklin C. Comins*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*Feb 7, 2000*  
Date

*(616) 381-8070*  
Daytime Phone #

CR2E003 (9/99)