

FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

FILED

03 MAR 26 AM 10: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # A9900000764

1. Name of Limited Partnership

THE MELYOL SPENCER FAMILY LIMITED PARTNERSHIP 00012885260

						02/12/03	3010380	/15 **1C	126.25	
2. Principal Office Address	3. Mailing Office Address 127 Via Verde				4. Date Formed or Registered To Do Business in Florida 1999					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. FEI Number 65-0920			Applied For Not Applicable	
City & State Palm Beach Gardens Palm Beach Gardens, Fl						CERTIFICATE OF STATUS DESIRED				
33148 C	usa	33148		usa		2,156,967.40 7b. Amount of Capital Contributions in FLORIDA to date:				
	Name and Address of C	urrent Registerer	d Agent			2,156,967.40				
Name Marc Spencer					1.	FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50,				
Street Address (P.O. Box Number is Not Acceptable) 127 Via Verde					2.	for <u>each year due</u> this office. 2.) Supplemental Fee(s): \$88.75 for <u>each year due</u> this office, beginning				
Suite, Apt. #, Etc.						with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 7b is greater than amount entered in				
City Palm Beach Gardens State Zip C FL 33148				Zip Code 33148		76, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.				
agent. I am familiar with, and	its registered office or registered discount the obligations of sections	ed agent, or both, in th	he State of Flo				partner(s). I hereby acc		nent of registered	
A GENERAL PA	RTNER THAT IS	A CORPOR	RATION ERED /	I, LIMITED) PARTI VE WIT	NERSHIP H THIS O	OR OTHER	BUSINES	SS ENTITY	
10. Name(s) of Genera	al Partner(s)		of Each Gene e Post Office	eral Partner Box Numbers)		City, State and	Zip Code	10a. _{Do}	Registration ocument Number	
Melyol,	Inc.	127 Via	Verd	a	1	Beach (33148	Gardens	-P.9900	0042760	
02 FF \$58	36.35									
_	526.25	1								

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11.	I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate on this annual report is true and accurate any first my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver trustee empowered to execute this report at refugered by chapter 620. Florida Statutes.	
SIG	NATURE	
Typed	or Printed Name of General Partner Signing Form Melvin Spence, Passidens Melyol, Jie Telephone Number (SCI) 624-7485	

(10/02)

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MY ADDRESS
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THE FORM WAS
NEUER FORWARDS
SHOULD I BE
DENALSED?
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