

2001 UNIFORM BUSINESS REPORT (UBR)

0002110 AF

DOCUMENT # A99000000896
1. Entity Name
 GUARDIAN-JUPITER PARTNERS, LTD.

FILED

01 MAR 23 PM 12:30

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



Principal Place of Business 1551 SANDSPUR ROAD
 MAITLAND FL 32751
Mailing Address P.O. BOX 4961
 ORLANDO FL 32802

2. Principal Place of Business Suite, Apt. #, etc.
 City & State
 Zip Country
3. Mailing Address Suite, Apt. #, etc.
 City & State
 Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3627434
APPLIED FOR
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 B & C CORPORATE SERVICES OF CENTRAL FL INC
 390 NORTH ORANGE AVENUE, SUITE 1100
 ORLANDO FL 32801

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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$100.00**
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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P99000050256	STREET ADDRESS	
NAME	GUARDIAN JUPITER G.P., INC.	CITY-ST-ZIP	200003931282-0
STREET ADDRESS	1551 SANDSPUR ROAD		-03/30/01--01052--006
CITY-ST-ZIP	MAITLAND FL 32751		****141.25 ****141.25
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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)(l), 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

GUARDIAN JUPITER G.P., INC.

SIGNATURE: SIGNATURE REQUIRED

MICHAEL J. SARRINO, VICE PRES.

3/22/01
 Date

407/741-8500
 Daytime Phone #

CR2E003 (11/00)