

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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**DOCUMENT # A99000000921**



FILED

03 SEP 23 AM 9:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Entity Name  
**ANDREW A. ALLEN FAMILY LIMITED PARTNERSHIP**

Principal Place of Business  
**1115 STONEGATE CT  
ROSWELL GA 30075**

Mailing Address  
**1115 STONEGATE CT  
ROSWELL GA 39975**

2. Principal Place of Business  
**12<sup>E</sup> SPANISH TOWN COURT**  
Suite, Apt. #, etc.

3. Mailing Address  
**P.O. Box 898305**  
Suite, Apt. #, etc.

**DUE BY SEPTEMBER 24, 2003**

City & State  
**PANAMA CITY BEACH, FL**

City & State  
**DUNWOODY, GA**

4. FEI Number **65-0935252**

Applied For  
 Not Applicable

Zip  
**32413**

Country  
**WALTON**

Zip  
**30356-0305**

Country  
**DEKALB**

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

**PALERMO, ANTHONY M  
190 S.E. 19 AVENUE  
POMPAHO BEACH FL 33060**

Name  
**ANDREW A. ALLEN**  
Street Address (P.O. Box Number is Not Acceptable)  
**12<sup>E</sup> SPANISH TOWN COURT**

City  
**PANAMA CITY BEACH** FL Zip Code  
**32413**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE

9. Capital Contributions as Shown on record, **\$250,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #	<b>P99000049149</b>
NAME	<b>ALLEN HOLDINGS, CORP.</b>
STREET ADDRESS	<b>1115 STONEGATE CT</b>
CITY-ST-ZIP	<b>ROSWELL GA 30075</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>12<sup>E</sup> SPANISH TOWN COURT</b>
CITY-ST-ZIP	<b>PANAMA CITY BEACH, FL 32413</b>
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
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)(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: **ANDREW ALLEN** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**9-22-03** **678-491-4844**  
Date Daytime Phone #

CR2E003 (4/03)