

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001329**

1. Entity Name

THE REICH FAMILY LIMITED PARTNERSHIP

FILED

00 JAN 24 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 1416 TUSCA TRAIL WINTER SPRINGS FL 32708	Mailing Address 1416 TUSCA TRAIL WINTER SPRINGS FL 32708-3900
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number Applied For Not Applicable

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

REICH, STEPHEN G
1416 TUSCA TRAIL
WINTER SPRINGS FL 32708

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 _____

9. Capital Contributions as Shown on record. **\$4,200.00**

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 #
NAME REICH, STEPHEN G
STREET ADDRESS 1416 TUSCA TRAIL
CITY - ST - ZIP WINTER SPRINGS FL 32708

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME REICH, SHYLA G
STREET ADDRESS 1416 TUSCA TRAIL
CITY - ST - ZIP WINTER SPRINGS FL 32708

STREET ADDRESS
CITY - ST - ZIP

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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; the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: **REQUIRED** STEPHEN G. REICH **1/20/00** 407-695-2781
Date Daytime Phone #