

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001705**

1. Entity Name

DAVID BURKE ENTERPRISES, LTD.

Principal Place of Business

**15110 NORTH 23RD STREET
LUTZ FL 33549**

Mailing Address

**15110 NORTH 23RD STREET
LUTZ FL 33549**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY SEPTEMBER 26, 2001

4. FEI Number

59-3604039

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

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

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.

\$5,000,000.00

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**BURKE, DAVID F
15110 NORTH 23RD STREET
LUTZ FL 33549**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**PORTWOOD, LINDA
15110 NORTH 23RD STREET
LUTZ FL 33549**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**KELLNER, DONNA
4705 NORTH PLATT ROAD
PLANT CITY FL 33565**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**WATERS, DEBRA
2014 EAST 151ST AVENUE
LUTZ FL 33549**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**SHEPARD, TONYA
15110 NORTH 23RD STREET
LUTZ FL 33549**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**BURKE, DAVID F JR.
14905 NORTH 74TH STREET
LUTZ FL 33549**

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
**100004618051-8
-10/01/01--01051--017
***926.25 ***926.25**

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

09-26-01 913 9333589

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH



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CR2E003 (5/01)

STAPLE CHECK HERE