

2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A99000001733

1. Entity Name

HYMAN FAMILY LIMITED PARTNERSHIP

FILED

2002 APR 29 PM 5:46

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Principal Place of Business

7766 N.W. 128TH AVE.
PARKLAND FL 33076

Mailing Address

3701 FAU BLVD., STE. 210
BOCA RATON FL 33431



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FENNER, JOHN P

3701 FAU BLVD., STE. 210

BOCA RATON FL 33431

Name

Street Address (P.O. Box Number is Not Acceptable)

2840 NW Boca Raton Blvd - Suite 107

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

JOHN FENNER JOHN FENNER

Signature, typed or printed name of registered agent and title if applicable.

4/19/02

DATE

9. Capital Contributions

\$25,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
HYMAN, MARK
7766 N.W. 128TH AVE.
PARKLAND FL 33076

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
HYMAN, LISA
7766 N.W. 128TH AVE.
PARKLAND FL 33076

STREET ADDRESS

CITY-ST-ZIP

800005500918--9

05/03/02 01053 005

****263.75 ****263.75

DOCUMENT #
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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:

Mark Hyman MARK HYMAN General Partner 4/102 954-755-6025

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)