

2001 UNIFORM BUSINESS REPORT (UBR)

0018047 AF

DOCUMENT # A99000001741

1. Entity Name

YOUNG FAMILY ENTERPRISES, LTD.

FILED
 01 APR -4 AM 8:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business **Mailing Address**

113 YACHT CLUB COURT 113 YACHT CLUB COURT
 FT. WALTON BEACH FL 32548 FT. WALTON BEACH FL 32548



2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3608479 **Applied For**
 Not Applicable

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

6. Name and Address of Current Registered Agent

FOSTER, WILLIAM SCOTT
 909 MAR WALT DRIVE, SUITE 1014
 FT. WALTON BEACH FL 32547

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** _____

9. Capital Contributions as Shown on record. \$98.00 **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 # | MOORE, ANNA YOUNG 113 YACHT CLUB COURT FT. WALTON BEACH FL 32548 | STREET ADDRESS | 888884035108-4 -04/20/01--01053--022 ****141.25 ****141.25 |
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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: Anna Young Moore 1/25/01 850/837-6677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)