

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000001825

1. Entity Name

BLUCHER BRIDGES & GAYL CHRISTIE FAMILY PARTNERSH

Principal Place of Business

102 HURON AVENUE  
TAMPA FL 33606

Mailing Address

102 HURON AVENUE  
TAMPA FL 33606-3310

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 20 AM 3:05



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

26 Aegean Ave

3. Mailing Address

26 Aegean Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa FL

City & State

Tampa FL

4. FEI Number

59-3607208

Applied For

Not Applicable

Zip

33606

Country

Zip

33606

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRIDGES, BLUCHER B  
102 HURON AVENUE  
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

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

26 Aegean Ave.

City

Tampa

FL

Zip Code

33606

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

4-17-2000

9. Capital Contributions  
as Shown on record.

\$86,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

119,000.00

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  
BRIDGES, BLUCHER B  
102 HURON AVENUE  
TAMPA FL 33606

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
CHRISTIE, ALICE G  
102 HURON AVENUE  
TAMPA FL 33606

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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  
CITY - ST - ZIP  
26 Aegean Ave.  
Tampa, FL 33606

STREET ADDRESS  
CITY - ST - ZIP  
26 Aegean Ave.  
Tampa, FL 33606

STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS  
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STREET ADDRESS  
CITY - ST - ZIP

STREET ADDRESS  
CITY - ST - ZIP

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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

Date

Daytime Phone #

4-17-2000