

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

0008023  
AT

DOCUMENT # A99000001839

1. Entity Name

MINNESOTA WAREHOUSES, LTD.

02 APR 15 PM 12:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

P.O. BOX 350  
WINTER PARK FL 32790-0350

Mailing Address

P.O. BOX 350  
WINTER PARK FL 32790-0350

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0962854

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DUE BY MAY 1, 2002

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BELLOWS, DANIEL B  
558 WEST NEW ENGLAND AVE.  
SUITE 210  
WINTER PARK FL 32789

Name  
DANIEL B. BelloWS  
Street Address (P.O. Box Number is Not Acceptable)  
533 W. New England Ave  
Suite C  
City Winter park FL Zip Code 32789

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.

VP Daniel B. BelloWS

4/6/02  
DATE

9. Capital Contributions  
as Shown on record.

\$990.00

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 # P95000022077  
NAME NEW ENGLAND AVE. DEVELOPMENT COMPANY  
STREET ADDRESS P.O. BOX 350  
CITY-ST-ZIP WINTER PARK FL 32790-0350

STREET ADDRESS

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

VP Daniel B. BelloWS 4/6/02 407-644-3151  
Date Daytime Phone #

CR2E003 (9/01)