

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAR 30 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mf 4/1

DO NOT WRITE IN THIS SPACE

DOCUMENT # A99000002077
1. Entity Name
R. JAMES AND BETTE M. BECKER LIMITED PARTNERSHIP

Principal Place of Business Mailing Address

2. Principal Place of Business 13256 White Violet Drive
Suite, Apt. #, etc.

3. Mailing Address 13256 White Violet Drive
Suite, Apt. #, etc.

City & State Naples, Florida

City & State Naples, Florida

4. FEI Number 65-0970103
Applied For Not Applicable

Zip 34119 Country USA

Zip 34119 Country USA

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 Naples-Lawdock, Inc.
Street Address (P.O. Box Number is Not Acceptable) c/o Quarles & Brady LLP
4501 Tamiami Trail North, Suite 300
City Naples FL Zip Code 34103

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, \$2,500,000 10. Amount of Capital Contributions in FLORIDA to date, \$2,500,000 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 #	Alebeth Corporation of Naples FEI Number: 59-3617244	STREET ADDRESS	13256 White Violet Drive
NAME		CITY-ST-ZIP	Naples, Florida 34119
STREET ADDRESS			
CITY-ST-ZIP			
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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:  (941) 596-7726
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER R. James Becker, Date Daytime Phone #

CR2E003 (9/99)