2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9900002114 1. Entity Name					SECRETARY OF STATE DIVISION OF CORPORATIONS	
NATHAN LIMITED PARTNERSHIP						
				02 FEB 11 PM 2: 03		
Principal Place of Business 14105 CALOOSA BLVD. PALM BEACH GARDENS FL 33418 COLTS NECK NJ 07722						
2. Principal Place of Business 3. Mailing Ad		3. Mailing Address	Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2002	
City & State		City & State			4. FEI Number Applied For Not Applied For	e
Zip	Country	Zip	Cour	ntry	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	ユ
Петыс	I MATUAM			Name		
JUSTINE J. NATHAN 14105 CALOOSA BLVD. PALM BEACH GARDENS FL 33418				Street Addre	ess (P.O. Box Number is Not Acceptable)	
						1
				City	FL Zip Code	٦
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable.			gistered agent, or both, in the State of Florida. DATE	
Capital Co as Shown	357 (1124 (1111) (111	10. Amount of Capita in FLORIDA to da		butions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	
					GISTERED AND ACTIVE WITH THIS OFFICE. ment must be filed to change a general partner.	
12.	GENERAL PARTNER		13.		ADDRESS CHANGES ONLY	⇉,
DOCUMENT # NAME	NATHAN, ALFRED III 14105 CALOOSA BLVD. PALM BEACH GARDENS FL 33418		STR	EET ADDRESS		Š
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		- 2
DOCUMENT # NAME	NATHAN, JUSTINE		STRE	EET ADDRESS	1000040240015	_ {
STREET ADDRESS CITY-ST-ZIP				-\$T-ZIP	1000049249815 -02/14/0201030005 ****526.25 ****526.25	
DOCUMENT / NAME	SHRIGLEY, WENDY A			EET ADDRESS	and the first of the second of	
STREET ADDRESS CITY-ST-ZIP	25 ELM ST. Marblehead ma 01945		CITY	-ST-ZIP		
DOCUMENT # NAME	NATHAN, PETER J		STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	272 WILLOW DR. LITTLE SILVER NJ 07739		CITY	-ST-ZIP		
OCUMENT # DINARDO, CYNTHIA M			STRE	ET ADDRESS	4611 Lazy Creek Lane	
STREET ADDRESS CITY-ST-ZIP 229 SEA MARSH DR. JOHN'S ISLAND SC 29455		•	CITY	-ST-ZIP	Wadmalaw Island, SC 29417	
DOCUMENT # NAME		• •	STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP		
indicated	certify that the information supplied with on this report is true and accurate and er or trustee empowered to execute thi	that my signature shall have t	ne same	e legal effect as	n Section 119.07(3)(i), Florida Statutes. I further certify that the information if made under oath; that I am a General Partner of the limited partnership of	r

Justine Nathan 1-30-02

732 866-4493