

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000002266

1. Entity Name  
WORONOFF LIMITED PARTNERSHIP

Principal Place of Business Mailing Address  
620 Coconut Palm Same  
Vero Beach, FL 32963

2. Principal Place of Business 3. Mailing Address

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

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

Valdes-Fauli Corporate Services, Inc.  
777 South Flagler Drive, Suite 500 East  
West Palm Beach, Florida 33401

4. FEI Number 65-0970279 Applied For Not Applicable

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

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 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. \$2,000,000

10. Amount of Capital Contributions in FLORIDA to date. -0-

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 # P99000111868  
NAME Woronoff Management, Inc.  
STREET ADDRESS 620 Coconut Palm Road  
CITY-ST-ZIP Vero Beach, FL 32963

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP 100003217191--9  
-04/21/00-01001-023  
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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

WORONOFF MANAGEMENT, INC., GENERAL PARTNER

SIGNATURE: BY Robert M. Woronoff, General Ptn. 7/24/00 561-231-4589  
Robert M. Woronoff, President

FILED

00 APR -6 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE