

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0016175 AT

DOCUMENT # B020000000035

1. Entity Name
SIDHOM FAMILY LIMITED PARTNERSHIP



FILED
03 APR 25 PM 4:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
202 SOUTH MINNESOTA STREET
C/O LEXIS DOCUMENT SERVICES, INC.
CARSON CITY NV 89703

Mailing Address
26091 MOUNTAIN LAKE ROAD
BROOKSVILLE FL 34602



2. Principal Place of Business
201 NOLAND DRIVE
Suite, Apt. #, etc.

3. Mailing Address
201 NOLAND DRIVE
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
BRANDON, FL
Zip
33511
Country
HILLSBOROUGH

City & State
BRANDON, FL
Zip
33511
Country
HILLSBOROUGH

4. FEI Number
59-3689036
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SIDHOM, SHAFIK
1250 GULF BLVD., #903
CLEARWATER FL 33767

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions
as Shown on record. \$250,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 #
NAME
STREET ADDRESS
CITY-ST-ZIP
SIDHOM, GEORGE S DR.
26091 MOUNTAIN LAKE ROAD
BROOKVILLE FL 34602

STREET ADDRESS
CITY-ST-ZIP
400017109344
04/25/03--01078--009 **141.25

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
SIDHOM, JEAN MARY
26091 MOUNTAIN LAKE ROAD
BROOKVILLE FL 34602

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

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

GEORGE SIDHOM, G.P. 4/22/03

Date Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE