

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B02000000081

1. Entity Name
IDEAL BUSINESS PROPERTIES LIMITED PARTNERSHIP



FILED
03 SEP 19 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
100 SOUTH THIRD STREET
COLUMBUS OH 43215

Mailing Address
100 SOUTH THIRD STREET
COLUMBUS OH 43215



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY SEPTEMBER 24, 2003

4. FEI Number

37-1416824

Applied For

Not Applicable

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

KRINER, DEBORAH L
5500 VILLAGE BLVD., SUITE 200
WEST PALM BEACH FL 33407

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

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

DATE

9. Capital Contributions
as Shown on record.

\$4,500,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$4,500,000.00

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 # M01000002068
NAME IDEAL BRANDS ENTERPRISES LLC
STREET ADDRESS 100 SOUTH THIRD STREET
CITY-ST-ZIP COLUMBUS OH 43215

STREET ADDRESS

CITY-ST-ZIP

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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 make this filing as required by Chapter 620, Florida Statutes.

IDEAL BRANDS ENTERPRISES LLC, General Partner

SIGNATURE:

James A. Sullivan
JAMES A. SULLIVAN
By: *James A. Sullivan*
JAMES A. SULLIVAN, Inc., Manager

9-18-03

Date

Daytime Phone #

CR2E003 (4/03)

0003072 MB