2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

6696000 AT

DOCUMENT # B93000000182

1. Entity Name
SHOOSTER INVESTMENT ASSOCIATES OF FLORIDA, LTD.

FILED
03 APR -1 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
555 E. BALTIMORE PIKE MEDIA PA 19063	2900 W. SAMPLE RD. POMPANO BEACH FL 33073

2. Principal Place of Business	3. Mailing Address
2900 W. Sample Road	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Beach, FL	City & State
Zip: 33073 Country: USA	Zip Country

DUE BY MAY 1, 2003

4. FEI Number 23-2535226 ☐ 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
SHOOSTER MANAGEMENT, INC. 2900 W. SAMPLE ROAD POMPANO BEACH FL 33073	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.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$0.00		

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 #	B00000000394	STREET ADDRESS	2900 W. Sample Road
NAME	HOSTABIDDABLE ASSOCIATES, L.P.	CITY-ST-ZIP	Pompano Beach, FL 33073
STREET ADDRESS	555 E. BALTIMORE PIKE, P.O. BOX 349		
CITY-ST-ZIP	MEDIA PA 19063-0349		
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CR2E003 (10/02)

STAPLE CHECK HERE

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 4-03 954-979-4555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Daniel H. Shooster, COO of Shooster Mgt., Inc. General Partner of Hostabiddable Assoc