

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # B93000000267

1. Entity Name
B&J Development Limited Partnership of Ohio

02 APR 30 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
212 East Third Street

Suite, Apt. #, etc.

Suite 300

City & State

Cincinnati, Ohio

Zip

45202

Country

U.S.A.

3. Mailing Address

212 East Third Street

Suite, Apt. #, etc.

Suite 300

City & State

Cincinnati, Ohio 45202

Zip

Country

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number

31-6166404

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Hafele, Dale G.

Street Address (P.O. Box Number is Not Acceptable)

12995 South Cleveland Avenue, Suite 214

City

Fort Myers

FL

Zip Code

33907

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

DATE

9. Capital Contributions
as Shown on record.

0

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 # F93000000955
NAME Ayers Development Corporation
STREET ADDRESS 212 East Third Street, Suite 300
CITY-ST-ZIP Cincinnati, Ohio 45202

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/29/02