

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2000 08:00 AM
Secretary of State

DOCUMENT # **B97000000081**

1. Entity Name
DOSWELL LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
700 UNIVERSE BLVD D-3000 JUNO BEACH 33408 FL	700 UNIVERSE BLVD D-3000 JUNO BEACH 33408 FL

2. Principal Place of Business	3. Mailing Address
	ATTN: RITA W. COSTANTINO

Suite, Apt. #, etc.	Suite, Apt. #, etc.
	700 UNIVERSE BOULEVARD

City & State	City & State
	JUNO BEACH FL

Zip	Country	Zip	Country
33408		33408	

4. FEI Number	Applied For
95-4223904	Not Applicable

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

6. Name and Address of Current Registered Agent

LEON J.E.
9250 W. FLAGLER ST

MIAMI
33174
US
FL

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 _____ DATE **02/28/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions
as Shown on record. 7,500.00

10. Amount of Capital Contributions
in FLORIDA to date. 7,500.00

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	DOSWELL I, INC.	11760 US HWY ONE	NORTH PALM BEACH FL 33408

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DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

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13. ADDRESS CHANGES ONLY

STREET ADDRESS	CITY-ST-ZIP
700 UNIVERSE BOULEVARD	JUNO BEACH FL 33408

STREET ADDRESS	CITY-ST-ZIP

STREET ADDRESS	CITY-ST-ZIP

STREET ADDRESS	CITY-ST-ZIP

STREET ADDRESS	CITY-ST-ZIP

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: RITA W. COSTANTINO

AS 02/28/2000