

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B99000000016

Entity Name

PB RANCH LIMITED PARTNERSHIP

Principal Place of Business

0 OLD RUDNICK LANE  
MOVER DE 19901

Mailing Address

C/O WILLIAM A. RUDNICK  
203 NORTH LASALLE STREET, SUITE 1800  
CHICAGO IL 60601-1210

Principal Place of Business

Suite, Apt. #, etc.

P.O. Box 1994

City & State

Okeechobee, FL

Zip

34973

Country

USA

3. Mailing Address

25734 West Eames St.

Suite, Apt. #, etc.

City & State

Channahon, IL

Zip

60410

Country

4. FEI Number

36-4262348

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIO.  
00 MAY -1 PM 12:06

*[Handwritten signature]*

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC.

3953 W.W. KELLEY ROAD

TALLAHASSEE FL 32311

7. Name and Address of New Registered Agent

Name

Richard V. Neill, Jr.

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

311 South Second Street

City

Ft. Pierce

FL

Zip Code

34950

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

Capital Contributions\*  
as Shown on record.

\$20,480,990.00

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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

F98000007068  
FI FARMS, INC.  
26124 WEST EAMES  
MINOOKA IL 60447

13.

ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

25734 West Eames St.

Channahon, IL 60410

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400003273474-7  
-05/01/00--01054--002  
\*\*\*\*282.50 \*\*\*\*141.25

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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

FI FARMS, Inc.

SIGNATURE: By:

*[Handwritten signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Judith Freund Vavrus, President

4/27/00

Date

815 467-678

Daytime Phone #