

2002 UNIFORM BUSINESS REPORT (UBR)

0001690 AB

141.25

DOCUMENT # A01000001540

1. Entity Name
COMPBNK JTS LTD. LLLP

FILED
02 SEP 30 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
200 N. LAURA STREET
JACKSONVILLE FL 32202

Mailing Address
200 N. LAURA STREET
JACKSONVILLE FL 32202

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY SEPTEMBER 25, 2002

City & State

4. FEI Number
04-3596177

Applied For
 Not Applicable

Zip Country

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

F&L CORP.
200 N. LAURA STREET
JACKSONVILLE FL 32202

Name

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

City **FL** Zip Code

9/27

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. **\$1.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$7,000**

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	SEFTON, JOHN T 200 N. LAURA STREET JACKSONVILLE FL 32202
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY-ST-ZIP	800008123808-3 -10/01/02--01006--007 ***193.75 ***141.27
STREET ADDRESS CITY-ST-ZIP	800008123808-3 -10/01/02--01006--007 ***193.75 ***141.25
STREET ADDRESS CITY-ST-ZIP	BK FF \$541.25
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	

CFR2E003 (4/02)

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 **9/5/02** **8716** **904 359**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

BRUSSELS
CHICAGO
DENVER
DETROIT
JACKSONVILLE
LOS ANGELES
MADISON
MILWAUKEE
ORLANDO
SACRAMENTO
SAN DIEGO/DEL MAR
SAN FRANCISCO
TALLAHASSEE
TAMPA
WASHINGTON, D.C.
WEST PALM BEACH

A01000001540
FOLEY & LARDNER
ATTORNEYS AT LAW

September 6, 2002

Florida Secretary of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

FILED
02 SEP 30 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Filing Limited Partnership Uniform Business Reports

Dear Sir or Madam:

I enclose two Uniform Business Reports for the following entities:

COMPBNK JTS LTD. LLLP
FLABNK JTS LLP

BK

I am also enclosing the filing fees for all these entities combined in the amount of \$282.50.

I could not find any record of receiving the initial Uniform Business Report from you. I therefore feel the imposition of the \$400 late fee for filing after May 1, 2002 is inappropriate.

Very truly yours,

John T. Sefton

JTS/sb
Enclosures

FOLEY & LARDNER
THE GREENLEAF BUILDING
200 LAURA STREET
JACKSONVILLE, FLORIDA 32202-3510
P. O. BOX 240
JACKSONVILLE, FLORIDA 32201-0240

WRITER'S DIRECT LINE
904.359.8716

EMAIL ADDRESS
jsefton@foleylaw.com

CLIENT/MATTER NUMBER
013698-0106

004.337099.1

TEL: 904.359.2000
FAX: 904.359.8700
WWW.FOLEYLARDNER.COM