

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0005713 AT

**DOCUMENT # A19049**



1. Entity Name  
**FIRST COAST PROPERTIES LIMITED**

**FILED**  
03 MAY -6 PM 8:53  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business  
**1826 WATERBURY LANE  
ORANGE PARK FL 32073**  
*32003*

Mailing Address  
**POST OFFICE BOX 963  
ORANGE PARK FL 32067-0963**



2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

*32003*

**DUE BY MAY 1, 2003**

4. FEI Number **59-2488372**

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

**EDDY, PAUL F.  
1826 WATERBURY LANE  
ORANGE PARK FL 32073**  
*32003*

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. **\$2,341,795.58**

10. Amount of Capital Contributions in FLORIDA to date. **2,341,795.58**

11. **MAKE CHECK PAYABLE TO FL. 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

13. ADDRESS CHANGES ONLY

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>EDDY, PAUL F.</b>	<b>1826 WATERBURY LANE</b>	<b>ORANGE PARK FL</b>
	<b>EDDY, VIRGINIA</b>	<b>1826 WATERBURY LANE</b>	<b>ORANGE PARK FL</b>

STREET ADDRESS	CITY-ST-ZIP

**800018311408**  
05/06/03--01125--011 \*\*535.00

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:** *Virginia Eddy*      *4/25/03*      *904 264 6568*

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

CR2E000 (10/02)