

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A27809**

1. Entity Name
FFLP, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -3 PM 1:33

Principal Place of Business
P. O. BOX 2973
PALM BEACH FL 33480

Mailing Address
P. O. BOX 2973
PALM BEACH FL 33480-2973



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0179685**

Applied For
Not Applicable

Zip Country

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

HERON, J E
232 AUSTRALIAN AVE.
PALM BEACH FL 33480

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

9. Capital Contributions as Shown on record. **\$100,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **25000.00**

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **K45946**
NAME **FLP INVESTMENT CORP.**
STREET ADDRESS **232 AUSTRALIAN AVE., STE. 2**
CITY - ST - ZIP **PALM BEACH FL 33480**

STREET ADDRESS
CITY - ST - ZIP
3000003288899-3
06/14/00-01070-025
*****141.25 ***141.25**

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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:

Bryk... Partner FLP Investment Corp
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
JEAN E HERON AS President

W. Miner
Date **4-16-00** Daytime Phone # **561-659-3060**

CR2E003 (9/01)