

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A32040**

1. Entity Name  
**VACATION PARK, LTD.**

APPROVED  
AND  
FILED

00 MAR 29 AM 10:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*mf 4/15*



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**% HOLYFIELD ASSOCIATES. P.A.  
1601 FORUM PLACE, SUITE 801  
WEST PALM BEACH FL 33401**

Mailing Address  
**% HOLYFIELD ASSOCIATES. P.A.  
1601 FORUM PLACE, SUITE 801  
WEST PALM BEACH FL 33401-8106**

2. Principal Place of Business  
**40 JAYNE & ASSOCIATES, INC.**

3. Mailing Address  
**40 JAYNE & ASSOCIATES, INC.**

Suite, Apt. #, etc.  
**242 ALPINE RD**

Suite, Apt. #, etc.  
**242 ALPINE RD**

City & State  
**W.P.B. FL**

City & State  
**WPB FL**

4. FEI Number **65-0327872**

Applied For  
Not Applicable

Zip **33405** Country **USA**

Zip **33405** Country **USA**

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

## 6. Name and Address of Current Registered Agent

**SHENKMAN, CURTIS L.  
11891 US HIGHWAY ONE  
N. PALM BCH. FL 33408**

## 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$299,071.00**

10. Amount of Capital Contributions in FLORIDA to date.

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 # **K90821**  
NAME **PALM BEACH ISLANDS & DEVELOPMENT, INC.**  
STREET ADDRESS **% 1601 FORUM PLACE, SUITE 801**  
CITY - ST - ZIP **WEST PALM BEACH FL 33401**

DOCUMENT #  
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## 13. ADDRESS CHANGES ONLY

STREET ADDRESS **40 JAYNE & ASSOCIATES, INC.  
242 ALPINE ROAD**  
CITY - ST - ZIP **WEST PALM BEACH, FL 33405**

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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: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/99)