2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED
02 MAR 18 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000632 AT

DOCUMENT # A96000000615

1. Entity Name

BAILES FAMILY LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
8989 SOUTH ORANGE AVENUE ORLANDO FL 32824	P.O. BOX 593688 ORLANDO FL 32859-3688

2. Principal Place of Business	3. Mailing Address
6424 Pine Castle Blvd.	6424 Pine Castle Blvd.
Suite, Apt. #, etc.: Suite A	Suite, Apt. #, etc.: Suite A
City & State: Orlando, FL	City & State: Orlando, FL
Zip: 32809 Country:	Zip: 32809 Country:

DUE BY MAY 1, 2002

4. FEI Number: 59-3404042 ☐ 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
BAILES, CHARLES E JR. 8989 SOUTH ORANGE AVENUE ORLANDO FL 32859-3688	Name Street Address (P.O. Box Number is Not Acceptable): 6424 Pine Castle Blvd., Suite A City: Orlando FL Zip Code: 32809

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: X Charles E Bailes Jr 3/14/02
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$1,200,000.00		

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 #		STREET ADDRESS	6424 Pine Castle Blvd., Suite A
NAME	BAILES, CHARLES J JR.	CITY-ST-ZIP	Orlando, FL 32809
STREET ADDRESS	8989 SOUTH ORANGE AVENUE		
CITY-ST-ZIP	ORLANDO FL 32859-3688		
DOCUMENT #		STREET ADDRESS	6424 Pine Castle Blvd., Suite A
NAME	BAILES, JACQUELINE H	CITY-ST-ZIP	Orlando, FL 32809
STREET ADDRESS	8989 SOUTH ORANGE AVENUE		
CITY-ST-ZIP	ORLANDO FL 32859-3688		
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP			

CR2E003 (9/01)

STAPLE CHECK HERE

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: X Charles E Bailes Jr 3/14/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #