

2002 UNIFORM BUSINESS REPORT (UBR)

0016482 AT

DOCUMENT # **A96000001272**

FILED

02 FEB 28 AM 10: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

BOYS ARE US, LTD.

Principal Place of Business

Mailing Address

**700 CENTRAL PARKWAY
STUART FL 34994
36**

**700 CENTRAL PARKWAY
STUART FL 34994
36**



2. Principal Place of Business

3. Mailing Address

*8607 SW Perry Ln.
Stuart, FL 34997-7936*

*8607 SW Perry Ln.
Stuart, FL 34997-7936*

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

65-0687008

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

**W.T. MCCREARY
700 CENTRAL PARKWAY
STUART FL 34994**

Name

*Mr. Wm T. McCreary
8607 SW Perry Ln.
Stuart, FL 34997-7936*

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

W.T. McCreary

Mr. Wm T. McCreary

2.22.02

Signature, typed or printed name of registered agent, and title if applicable.

DATE

9. Capital Contributions as Shown on record.

\$360,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P96000056348**
NAME **MAC PROPERTIES, INC.**
STREET ADDRESS **700 CENTRAL PARKWAY**
CITY-ST-ZIP **STUART FL 34994**

STREET ADDRESS *8607 SW Perry Ln.
Stuart, FL 34997-7936*

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

W.T. McCreary

SIGNATURE REQUIRED

Mr. Wm T. McCreary

2.22.02

772.485.2095

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE