

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000879

1. Entity Name

NICKLAUS/MN, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 20 AM 3:05

Principal Place of Business

11780 U.S. HIGHWAY ONE, SUITE 400
NORTH PALM BEACH FL 33408

Mailing Address

11780 U.S. HIGHWAY ONE, SUITE 400
NORTH PALM BEACH FL 33408-3042



2. Principal Place of Business

11780 U.S. Highway One

3. Mailing Address

11780 U.S. Highway One

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

DO NOT WRITE IN THIS SPACE

City & State

North Palm Beach, FL

City & State

North Palm Beach, FL

4. FEI Number

Applied For

Not Applicable

Zip

33408

Country

USA

Zip

33408

Country

USA

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

FHS CORPORATE SERVICES, INC

11780 U.S. HIGHWAY ONE, SUITE 300

NORTH PALM BEACH FL 33408

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$7,500.00

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 # P99000049231
NAME NICKLAUS FAMILY MANAGEMENT, INC.
STREET ADDRESS 11780 U.S. HIGHWAY ONE, SUITE 300
CITY - ST - ZIP NORTH PALM BEACH FL 33408

STREET ADDRESS

CITY - ST - ZIP

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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

Nicklaus Family Management, Inc.

By: Jack P. Bates, Secretary

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-17-00

561 627-8100

Date

Daytime Phone #