2002 UNIFORM BUSINESS REPORT (UBR)

001302 AT

DOCUMENT # A99000002209

FILED
02 MAR 11 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

VAUGHN FAMILY LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
201 NORTH, FRANKLIN STREET. SUITE 2200 TAMPA FL 33602	67 LADOGA AVENUE TAMPA FL 33606

2. Principal Place of Business	3. Mailing Address
100 South Ashley Dr.	
Suite, Apt. #, etc. Suite 1300	Suite, Apt. #, etc.
City & State Tampa, FL	City & State
Zip 33602 Country USA	Zip Country

DUE BY MAY 1, 2002

4. FEI Number 59-7168778 ☐ 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
KELLY, PETER J ESQ. 100 S. ASHLEY DRIVE, STE. 1300 TAMPA FL 33601	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

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
$9,250,100.00	$9,250,100.00	

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	
NAME	VAUGHN, ROBERT E	CITY-ST-ZIP	
STREET ADDRESS	67 LADOGA AVE.		
CITY-ST-ZIP	TAMPA FL 33606		
DOCUMENT #		STREET ADDRESS	
NAME	VAUGHN, FRANCES C	CITY-ST-ZIP	
STREET ADDRESS	67 LODOGA AVE.		
CITY-ST-ZIP	TAMPA FL 33606		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	400005108634--2 -03/14/02--01065--034 ****526.25 ****526.25
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CITY-ST-ZIP			

STAPLE CHECK HERE

CR2E003 (9/01)

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: Robert E. Vaughn MARCH 1, 2002
ROBERT E. VAUGHN Gen Partner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #