

2002 UNIFORM BUSINESS REPORT (UBR)

1062

09/12/02

DOCUMENT # **B99000000334**

1. Entity Name

RCF/GREEN HILLS, L.P.

FILED

02 SEP 12 AM 7:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

636 GOODSPRINGS ROAD
BRENTWOOD TN 37027

636 GOODSPRINGS ROAD
BRENTWOOD TN 37027

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY SEPTEMBER 25, 2002

4. FEI Number **62-1785340**

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

DATE _____

9. Capital Contributions as Shown on record.

\$10,000.00

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 #	M99000000761
NAME	RCF ENTERPRISES, LLC
STREET ADDRESS	636 GOODSPRINGS ROAD
CITY-ST-ZIP	BRENTWOOD TN 37027
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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***167.50 ***167.50

CR2E003 (4/02)

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 C FREY* 9-9-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

615-372-3006

202
FILED
B97000000334

September 8, 2002

Ms. Michelle Milligan
Division of Corporations
Registration Section
409 E. Gaines St.
Tallahassee, Fl. 32399

Re: RCF/Green Hills, LP, Federal ID #62-1785340

Dear Michelle,

Thank you for your help with my uniform business report filings. As we discussed, I never received notices prior to the ones I am filing, which arrived in early summer. I sincerely appreciate your honoring my request to waive the late fee associated with this filing. I assure you, we will be looking for next years forms in spring, 2003.

This request is made on behalf of RCF/Green Hills, LP, Federal ID #62-1785340.

Respectfully,



Robert C. Frey
RCF Enterprises, LLC
General Partner

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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