

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A24722**

1. Entity Name

**CHRISTOPHER WOODS ASSOCIATES, LTD.**

Principal Place of Business

**3020 HARTLEY ROAD  
SUITE 300  
JACKSONVILLE FL 32257**

Mailing Address

**3020 HARTLEY ROAD  
SUITE 300  
JACKSONVILLE FL 32257**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

**FARRELL, MARK T  
3020 HARTLEY ROAD  
SUITE 300  
JACKSONVILLE FL 32257**

7. Name and Address of New Registered Agent

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.

**\$600,000.00**

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

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ROOD, JOHN D.  
3020 HARTLEY ROAD  
JACKSONVILLE FL 32257**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**M85266  
VESTCOR FINANCIAL ASSOCIATES II, INC.  
3020 HARTLEY ROAD  
JACKSONVILLE FL 32257**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP  
**3020 Hartley Road, Suite 300  
Jacksonville FL 32257**

STREET ADDRESS  
CITY-ST-ZIP  
**3020 Hartley Road, Suite 300  
Jacksonville, FL 32257**

STREET ADDRESS  
CITY-ST-ZIP  
**100004423481--2  
06/15/01 01106-002  
\*\*\*\*\*437.50 \*\*\*\*\*437.50**

STREET ADDRESS  
CITY-ST-ZIP  
**100004423481--2  
06/15/01 01106-003**

STREET ADDRESS  
CITY-ST-ZIP  
**\*\*\*\*\*88.75 \*\*\*\*\*88.75**

STREET ADDRESS  
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:

*Bernard E. Smith*

**REQUIRE** Bernard E. Smith

April 19, 2001

(904) 260-3030

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

APPROVED  
AND  
FILED

01 JUN 13 AM 10:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

**59-2833206**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

001789 AF

CR2E003 (11/00)