

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000000430

1. Entity Name

JAMES S. MULHOLLAND, JR. FAMILY LIMITED PARTNERS  
HIP

Principal Place of Business

Mailing Address

1100 BEACH RD., APT 3K  
VERO BEACH FL 32963

1100 BEACH RD., APT 3K  
VERO BEACH FL 32963

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

DUE BY MAY 1, 2002

4. FEI Number 65-0988295

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

PATRICIA F. CHERRY, C/O JOHNS ISLAND  
PROPERTY OWNERS ASSOCIATION  
ONE TURTLE BEACH ROAD  
VERO BEACH FL 32963

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.

DATE

9. Capital Contributions as Shown on record. \$1,800,000.00

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 # L00000002590  
NAME JAMES S MULHOLLAND JR LLC  
STREET ADDRESS 1100 BEACH RD., APT 3K  
CITY-ST-ZIP VERO BEACH FL

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
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STREET ADDRESS

CITY-ST-ZIP

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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:

*James S. Mulholland Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/30/02 561 234 0898  
Date Daytime Phone #

FILED

02 MAR 18 PM 3:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MJH



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CR2E003 (9/01)

STAPLE CHECK HERE