2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

A00000000627

BTB STEGALL, LIMITED



Principal Place of Business 8930 BAY COLONY DRIVE Mailing Address * ELBERT S. STEGALL. IR 767 QUAIL RUN 58 BROKO MOOR. SALERNO UNIT NO. 504 NAPLES FL 34108

FILED 2003 MAY 27 AM 9: 33 DIVIJION OF CORPORATIONS LALLAHASSEE, FLORIDA



| - ARKJONI WY | | | | | | | |
|--|--|-----------------|---------------------------------------|-----------------------------------|--|--|--|
| 2. Principal Place of Business | | | 3. Mailing Address 38305 | | | 3 IDENTIFY CONTROL OF THE STATE OF THE STATE S | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | DUE BY MAY 1, 2003 | |
| City & State | | | City & State | | _ | 4. FEI Number NOT APPLICABLE Applied For Not Applicable | |
| Zip | | Country | Zip | Coun | try | 5. Certificate of Status Desired | |
| 6. Name and Address of Current Registered Agent | | | | | · | 7. Name and Address of New Registered Agent | |
| BADGETT, TOM | | | | | Name | | |
| 130_MURRAY_CT.,_N.W | | | | | Street Address (P.O. Box Number is Not Acceptable) | | |
| LAKE PLACID FL 33852 | | | | | | | |
| | | | | | 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 acce | | | | | | | |
| the obligati | ions of regist | ered agent. | • | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. | | | | | | | |
| 9. Capital Contributions as Shown on record. \$970,000.00 10. Amou in FLC | | | 10. Amount of in FLORI | of Capital Contrib DA to date. | outions 4 | 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION | |
| | | | HAT IS A BUSINE | SS ENTITY M | UST-BE RE | GISTERED AND ACTIVE WITH THIS OFFICE. | |
| 12. | GENERAL PARTNER INFORMATION | | | 13. | | ADDRESS CHANGES ONLY | |
| DOCUMENT # NAME | STEGALL, ELBERT S JR 63 PINE TREE DRIVE JACKSON TN 38901 | | | STRE | ET ADDRESS | 59 Broadmoor | |
| STREET ADDRESS CITY-ST-ZIP | | | | CITY | JACKSON, TN. 38305 | | |
| DOCUMENT # NAME | WARD, MILDRED B AUSTIN | | | STRE | ET ADDRESS | 808 S. VIVIAN Way | |
| STREET ADDRESS | 668 WATS | ON BRANCH DRIVE | . نيون د نيدر سريمونچو يو. ر | CITY | | Brantwood TN 37027 | |
| DOCUMENT # NAME | STEGALL. | ELBERT S III | | STRE | ET ADDRESS | . / | |
| STREET ADDRESS CITY-ST-ZIP | 767 QUAI | | | CITY | -ST-ZIP | · | |
| DOCUMENT / NAME | | | | STRE | ET ADDRESS | 100016340201 04/21/0301013009 **437.50 | |
| STREET ADDRESS CTTY-ST-ZIP | | | | CITY | -ST-ZIP | 0117 1.17 0.0 301 (1.0 0.0 0.0 1.21 1.0 0.0 1.0 0.0 1.21 | |
| OCUMENT / | ., | | | STRE | ET ADDRESS | | |
| STREET ADDRESS CITY-ST-ZIP | | | | СІТУ- | -ST-ZIP | 05/28/03-01010-022 ***88.75 | |
| DOCUMENT # | | | · · · · · · · · · · · · · · · · · · · | STRE | ET ADDRESS | | |
| 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:

CITY-ST-ZIP