

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0006813 AT

DOCUMENT # A00000001060

1. Entity Name  
HOBBS FAMILY PARTNERSHIP, LLLP



FILED

2003 JAN 24 PM 1:17

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



Principal Place of Business  
375 ROB ROY TRAIL  
TALLAHASSEE FL 32312

Mailing Address  
375 ROB ROY TRAIL  
TALLAHASSEE FL 32312

2. Principal Place of Business  
7235 OLD CHEMONIE CT  
Suite, Apt. #, etc.

3. Mailing Address  
Same  
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State  
TALLAHASSEE FL

City & State

4. FEI Number NOT APPLICABLE

Applied For  
Not Applicable

Zip 32309 Country USA

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

HOBBS, WILLIAM M  
375 ROB ROY TRAIL  
TALLAHASSEE FL 32312

Name  
Street Address (P.O. Box Number is Not Acceptable)  
7235 OLD CHEMONIE CT  
City TALLAHASSEE FL Zip Code 32309

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 William M Hobbs PARTNER 1.9.03  
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$2,500,000.00

10. Amount of Capital Contributions in FLORIDA to date. \$2,200,000

11. MAKE CHECK PAYABLE TO FL. 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 #  
NAME HOBBS, PATRICIA M TRUSTEE  
STREET ADDRESS 375 ROB ROY TRAIL  
CITY-ST-ZIP TALLAHASSEE FL 32312

STREET ADDRESS 7235 OLD CHEMONIE CT  
CITY-ST-ZIP TALLAHASSEE FL 32309

DOCUMENT #  
NAME HOBBS, WILLIAM M TRUSTEE  
STREET ADDRESS 375 ROB ROY TRAIL  
CITY-ST-ZIP TALLAHASSEE FL 32312

STREET ADDRESS 7235 OLD CHEMONIE CT  
CITY-ST-ZIP TALLAHASSEE FL 32309

DOCUMENT #  
NAME HOBBS, WILLIAM M  
STREET ADDRESS 375 ROB ROY TRAIL  
CITY-ST-ZIP TALLAHASSEE FL 32312

STREET ADDRESS  
CITY-ST-ZIP 400009992234  
01/09/03-01053-017 \*\*\*437.50

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP 400009992234  
01/24/03-01074-002 \*\*\*88.75

DOCUMENT #  
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CITY-ST-ZIP

DOCUMENT #  
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CITY-ST-ZIP

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: William M Hobbs PARTNER 1.9.03 850-385-6183  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)



FLORIDA DEPARTMENT OF STATE

Ken Detzner  
Secretary of State

January 15, 2003

HOBBS FAMILY PARTNERSHIP, LLLP  
7235 OLD CHEMONIE CT.  
TALLAHASSEE, FL 32309

SUBJECT: HOBBS FAMILY PARTNERSHIP, LLLP  
Ref. Number: A00000001060

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for HOBBS FAMILY PARTNERSHIP, LLLP and your check(s) totaling \$437.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file the enclosed annual report/uniform business report is \$526.25. If a certificate of status is desired, please add an additional \$8.75. The basic annual report/uniform business report filing fee is figured at the rate of \$7.00 per thousand on the actual capital contribution plus a supplemental fee of \$88.75 pursuant to s. 607.193, Florida Statutes, effective 1/1/97. The filing fee shall be no less than \$141.25 (\$52.50 + \$88.75) and no more than \$526.25 (\$437.50 + \$88.75).

Attached is a computer printout for your partnership which shows the general partner(s) according to our records. Your annual report/uniform business report must list the same partners as shown on the printout. To change the partner(s), an amendment must be filed and the appropriate filing fee submitted in accordance with chapter 620, Florida Statutes.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section  
Division of Corporations Letter Number: 603A00002058