


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # A00000001324		
1. Entity Name VESTCOR EXECUTIVE PARTNERSHIP 2000, LLLP		

Principal Place of Business 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE, FL 32257	Mailing Address 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE, FL 32257
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. # etc.	
City & State		City & State	
Zip	Country	Zip	Country



01272005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3665548	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FARRELL, MARK T 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE, FL 32257		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 _____
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9. Capital Contributions as Shown on record. \$6,100.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 STREET ADDRESS CITY-ST-ZIP	P98000033302 VESTCOR, INC. 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE, FL 32257	STREET ADDRESS CITY-ST-ZIP	
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04/30/05-80074-006 141.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Mark T. Farrell</u>	DATE: <u>4/21/05</u>	DAYTIME PHONE: <u>904-260-3030</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		

STAPLE CHECK HERE