

2002 UNIFORM BUSINESS REPORT (UBR)

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0002153 AB

DOCUMENT # A00000001853
1. Entity Name
 MCBRIDE FAMILY LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 AUG 29 AM 10:30

Principal Place of Business **Mailing Address**
 6818 GULF DRIVE 6818 GULF DRIVE
 HOLMES BEACH FL 34217 HOLMES BEACH FL 34217



2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. **Suite, Apt. #, etc.**

City & State **City & State**

DUE BY SEPTEMBER 25, 2002
4. FEI Number 65-1056691
 Applied For
 Not Applicable

Zip **Country** **Zip** **Country**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 MCBRIDE, KENNETH
 6818 GAULT DRIVE
 HOLMES BEACH FL 34217
*correct address
 6818 GULF DRIVE*

-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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ **DATE** _____
Signature, type or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$3,000,000.00

10. Amount of Capital Contributions in FLORIDA to date. 3,000,000

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 #	L00000014299
NAME	MCBRIDE MANAGEMENT LLC
STREET ADDRESS	6818 GULF DRIVE
CITY-ST-ZIP	HOLMES BEACH FL 34217
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

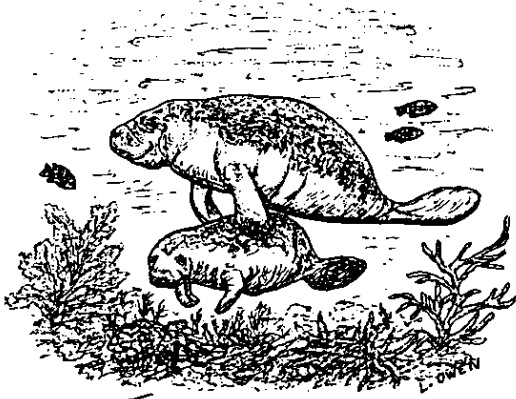
13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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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: *Kenneth P. McBride* *July 11, 02* *1-941-778-5507*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (4/02)



August 26, 02

To whom it may concern -

The enclosed 2002 uniform Business report (UBR) was received by us on July 16, 02 the day the check (enclosed was written) and has been returned.

The address on the form as shown as 6818 Hault Drive, and the address is (where dwelling is) is 6818 Gulf Drive. We therefore did not even believe we were late as I mentioned we wrote the check immediately upon receipt.

I hope this matter can be closed & address corrected for future mailing.

Respectfully,
Kearl C. Fude