2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCU 1. Entity Nam VANNOI		FILED 103 MAY -7 PM 1:30									
701 FISK STR JACKSONVILL		Mailing Address C/O CONE & YOUNG, P.A. 701 FISK STREET, SUITE 110 JACKSONVILLE FL 32204				'SECRET'ARY OF STATE TALLAHASSEE, FLORID'A					
2. Principal Place of Business 701 Riverside Park Place 701 Riverside Park Place 701 Rivers			e Park Place						OOKI OOJII	/ BB(00 (1))((B(B(100)	
Suite, Apt. Suite	#, etc.	Suite, Apt. #, etc. Suite 110				DUE BY MAY 1, 2003					
City & Stat	e nville, FL	City & State Jacksonville, FL				4. FEI Number APPLIED FOR Applied For Not Applicable					
Zip 32204	Country	Zip Cour 32204		try	5. Certificate of Status Desired				S8.75 Additional Fee Required		
				7. Name and Add		Registered	Agent				
YONG, FRANK J ESQ. C/O CONE & YOUNG, P.A. 701 FISK STREET, SUITE 110				Street Ad	Frank J. Yong, Esquire Street Address (P.O. Box Number is Not Acceptable) 701 Riverside Park Place, Suite 110						
JACKSONVILLE FL 32204				9acks	sonvi	lle		FL	322	2 0 ⊄#e	
	named entity submits this statement for ions of registered againt.	the purpose of changing its	registere	ed office or	registere	d agent, or both, in	the State of F		L	with, and accept	
SIGNATURE .	Signature, typed or patted name of registered agent as	d title it applicable						DATE			
9. Capital Co as Shown			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				ADDRESS CHANGES ONLY						
DOCUMENT #	P01000002544 VANNORTWICK, INC.		STRE	ET ADDRESS	701 Riverside Park Place, Suite 110					110	
STREET ADDRESS CITY-ST-ZIP	701 FISK STREET, SUITE 110 JACKSONVILLE FL 32204			ST-ZIP	Jacksonville, FL 32204						
DOCUMENT / NAME			STREE	ET ADDRESS							
STREET ADDRESS			CITY-	ST-ZIP					· 		
OCUMENT # NAME			STREE	ET ADDRESS		900	0184	475	99		
STREET ADDRESS CITY-ST-ZIP	-		CITY-	ST-ZIP		05/07/03	01.032-		##52E	.25	
OCUMENT # NAME		•	STREE	ET ADORESS							
STREET ADDRESS CITY-ST-ZIP	l	·	CITY-	ST-ZIP							
OCUMENT # NAME			STREE	T ADDRESS							
STREET ADDRESS CITY-ST-ZIP			CITY-	ST-ZIP							
OCUMENT # IAME		, —	STREE	T ADDRESS							
TREET ADDRESS		•	CITY.	ST-71P							

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:

STAPLE CHECK HERE

SURATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/20/03

850-487-1000

Daytime Phone #