

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A01000000793

1. Entity Name
WOODWARD FAMILY INVESTMENT PARTNERSHIP, LLLP



FILED
03 FEB 19 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1520 ROYAL PALM SQUARE BLVD.
SUITE 320
FT. MYERS FL 33919

Mailing Address
1520 ROYAL PALM SQUARE BLVD.
SUITE 320
FT. MYERS FL 33919



2. Principal Place of Business
14031 Eagle Ridge Lakes Dr.

3. Mailing Address
14031 Eagle Ridge Lakes Dr.

Suite, Apt. #, etc.
Unit 102

Suite, Apt. #, etc.
Unit 102

DUE BY MAY 1, 2003

City & State
Fort Myers, FL

City & State
Fort Myers, FL

4. FEI Number 65-1143390

Applied For
Not Applicable

Zip Country
33912 USA

Zip Country
33912 USA

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

6. Name and Address of Current Registered Agent

KYLE, KEVIN A
1520 ROYAL PALM SQUARE BLVD.
SUITE 320
FT. MYERS FL 33919

7. Name and Address of New Registered Agent

Name
Charlene Woodward
Street Address (P.O. Box Number is Not Acceptable)
14031 Eagle Ridge Lakes Dr., Unit 102
City Fort Myers, FL Zip Code 33912

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 Charlene Woodward General Partner 2-10-03
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$1,200,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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

DOCUMENT #
NAME WOODWARD, CHARLENE TRUSTEE
STREET ADDRESS 8200 ARBORFIELD COURT
CITY-ST-ZIP FT. MYERS FL 33912

DOCUMENT #
NAME WOODWARD, JAMES R TRUSTEE
STREET ADDRESS 8200 ARBORFIELD COURT
CITY-ST-ZIP FT. MYERS FL 33912

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 14031 Eagle Ridge Lakes Dr., Unit 102
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 14031 Eagle Ridge Lakes Dr., Unit 102
CITY-ST-ZIP

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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: SIGNATURE REQUIRED Charlene Woodward 2-10-03 239/768-0169

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE