

2002 UNIFORM BUSINESS REPORT (UBR)

0013896 AT

DOCUMENT # A01000001309

1. Entity Name

COUCH FAMILY PROPERTIES, LTD.

FILED

2002 APR 30 AM 8:41

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business

1223 MURRAY AVENUE
CLEARWATER FL 33755

Mailing Address

1223 MURRAY AVENUE
CLEARWATER FL 33755

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-3748345

Applied For

Not Applicable

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

COUCH, JOSEPH H III
1223 MURRAY AVENUE
CLEARWATER FL 33755

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$100.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$453,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	COUCH, JOSEPH H JR.	37 BREEZE HILL LANE	PALM COAST FL 32137
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	COUCH, JOSEPH H III	1223 MURRAY AVENUE	CLEARWATER FL 33755
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	PIKE, MARY C	601 ROSARY ROAD, APARTMENT #405	LARGO FL 33770
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700005597207--2
CITY-ST-ZIP	-05/22/02--01032--006
	2285.00 *535.00
STREET ADDRESS	
CITY-ST-ZIP	
	FF \$526.25
STREET ADDRESS	
CITY-ST-ZIP	CUS 8.75
STREET ADDRESS	
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: Joseph H. Couch III 4/23/02 727-469-8723
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)