

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02000000067

1. Entity Name  
PHELPS INVESTMENTS LIMITED PARTNERSHIP



FILED

03 APR 16 PM 2:44

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MJM

Principal Place of Business  
1340 OLDE DOUBLOON DRIVE  
VERO BEACH FL 32963

Mailing Address  
1340 OLDE DOUBLOON DRIVE  
VERO BEACH FL 32963



2. Principal Place of Business  
11435 SW 82<sup>ND</sup> CT. Rd.

3. Mailing Address  
11435 SW 82<sup>ND</sup> CT. Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State  
Ocala FL

City & State  
Ocala FL

4. FEI Number  
01-0582215

Applied For  
Not Applicable

Zip  
34481

Country  
MARION

Zip  
34481

Country  
MARION

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

GARRIS, CHARLES E  
817 BEACHLAND BLVD.  
VERO BEACH FL 32963

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

9. Capital Contributions  
as Shown on record. \$1,000,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # P02000004273  
NAME THE PHELPS MANAGEMENT COMPANY, INC.  
STREET ADDRESS 1340 OLDE DOUBLOON DRIVE  
CITY-ST-ZIP VERO BEACH FL 32963

STREET ADDRESS 11435 SW 82<sup>ND</sup> CT. Rd.  
CITY-ST-ZIP Ocala, FL 34481

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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: Henry B. Phelps  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-5-03 352-873-7248  
Date Daytime Phone #

0008980 AT

CR2E003 (10/02)

STAPLE CHECK HERE