

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0021101 FP

DOCUMENT # A0200000977

1. Entity Name
PASSMORE FAMILY LIMITED PARTNERSHIP



FILED

03 MAY -6 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
445 10TH STREET, NW
VERO BEACH, FL 32962

Mailing Address
445 10TH STREET, NW
VERO BEACH FL 32962



2. Principal Place of Business
445 10TH STREET S.W.

3. Mailing Address
445 10TH STREET S.W.

City & State
Vero Beach, FL.

City & State
Vero Beach, FL.

DUE BY MAY 1, 2003

4. FEI Number
52-2372358

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

6. Name and Address of Current Registered Agent

PEEK, DAVID H
1301 RIVERPLACE BOULEVARD, SUITE 1609
JACKSONVILLE FL 32207

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

9. Capital Contributions as Shown on record. \$300,100.00

10. Amount of Capital Contributions in FLORIDA to date. \$400,000.00

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 # | NAME SHIRLEY, GRACE A | STREET ADDRESS | 700018298227 |
| | STREET ADDRESS 324 A VILLAGE DRIVE | CITY-ST-ZIP | 05/06/03--01074--006 **526.25 |
| | CITY-ST-ZIP ST. AUGUSTINE FL 32084 | | |
| DOCUMENT # | NAME PASSMORE, GAY S | STREET ADDRESS | 445 10TH STREET S.W. |
| | STREET ADDRESS 445 10TH STREET, NW | CITY-ST-ZIP | Vero Beach, FL. 32962 |
| | CITY-ST-ZIP VERO BEACH FL 32962 | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | STREET ADDRESS | CITY-ST-ZIP | |
| | CITY-ST-ZIP | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | STREET ADDRESS | CITY-ST-ZIP | |
| | CITY-ST-ZIP | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | STREET ADDRESS | CITY-ST-ZIP | |
| | 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 Gay S. Passmore 4/8/03 772-978-0505

SIGNATURE (TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER) Date Daytime Phone #

CP2E003 (10/02)