## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

## A0200001074 **DOCUMENT #**

1. Entity Name



BAGLEY DEVELOPMENT PARTNERSHIP, LTD.				03 APR 25 PM 4.40	
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Principal Place of Business 4200 FOREST HILLS DRIVE 4200 FOREST HILLS DRIVE LAKELAND FL 33813 LAKELAND FL 33813			<u></u>	<u> </u>	SECRETARY OF STATE TALLAHASSEE FLORIDA TALLAHASSEE FLORIDA
2. Principal F	lace of Business	3. Mailing Address		<u>.</u> .	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003
City & State		City & State			4. FEI Number Applied For Not Applicable
Zip Country		Zip	Country		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
LANCASTER, JOHN J				Name	
500 SOUTH FLORIDA AVENUE, SUITE 800				Street Address	(P.O. Box Number is Not Acceptable)
LAKELAND FL 33801					
	5 1 2 00001				
				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					
9. Capital Co	Signature, typed or printed name of registered agent	and title if applicable.  10. Amount of Capita	al Contri	hutions	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
9. Capital Contributions as Shown on record. \$15,000,000.00 in FLORIDA to date.				<u>250,</u>	
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 #	BAGLEY ENTERPRISES, INC.		STR	EET ADDRESS	
NAME STREET ADDRESS			ł	.	<del>300017114953</del>
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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:** 

SLATE UPEUN HEKE

Daytime Phone #

CR2E003 (10/02)