

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A02000001607

1. Entity Name

FANNING-SUWANEE DEVELOPMENT GROUP, LTD.



FILED

03 APR -4 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2700-A NW 43rd Street

Suite, Apt. #, etc.

3. Mailing Address

2700-A NW 43rd Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

City & State

Gainesville, FL 32606

City & State

Gainesville, FL 32606

4. FEI Number

33-1034606

Applied For

Not Applicable

Zip

32606

Country

Alachua

Zip

32606

Country

Alachua

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Charles I Holden, Jr.

Street Address (P.O. Box Number is Not Acceptable)

HOLDEN, RAPPENECKER AND EUBANK, P.A.

2772-S NW 43rd Street

City

Gainesville

FL

Zip Code
32606

**DO NOT WRITE
IN THIS SPACE**

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.

03-07-03

DATE

9. Capital Contributions

as Shown on record.

\$200,840.00

10. Amount of Capital Contributions

in FLORIDA to date.

\$200,840.00

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

DOCUMENT # A02000001607
NAME William D. Olinger, III
STREET ADDRESS 2700-A NW 43rd Street
CITY-ST-ZIP Gainesville, FL 32606

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CITY-ST-ZIP Gainesville, FL 32606

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 600014082306
CITY-ST-ZIP 03/14/03--01025--006 **446.25

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STREET ADDRESS 600014082306
CITY-ST-ZIP 04/04/03--01006--015 **80.00

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: X William D Olinger, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

William D. Olinger, III 3/4/03 (352) 373-3337

Date

Daytime Phone #

CR2E003B (12/02)