FILED

03 JAN 29 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02 000001 6065

1. Entity Name

Vestor Fund XXXVIII, Ltd.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3020 Hartley Road
Suite, Apt. #, etc.
Suite 300
City & State
Jacksonville, FL
Zip 32257 Country USA

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DUE BY MAY 1

4. FEI Number
65-1164297
☐ Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Frick, Stephen A.
Street Address (P.O. Box Number is Not Acceptable)
3020 Hartley Road
Suite 300
City Jacksonville FL Zip Code 32257

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] DATE 1-21-03
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. 99.99

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

DOCUMENT #	L02000033545
NAME	Vestor Partners XXXVIII, LLC
STREET ADDRESS	3020 Hartley Road, Suite 300
CITY-ST-ZIP	Jacksonville, FL 32257
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CR2E003B (12/02)

STAPLE CHECK HERE

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] 1-21-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date