

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

1062

0001974 AB

DOCUMENT # A02000001688

1. Entity Name
HANSEN PASTURE PROPERTIES, LTD.



FILED

03 SEP 17 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
1200 RIVERPLACE BOULEVARD, SUITE 902
JACKSONVILLE FL 32207

Mailing Address
1200 RIVERPLACE BOULEVARD, SUITE 902
JACKSONVILLE FL 32207

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
02-0696753

Applied For
Not Applicable

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

DUE BY SEPTEMBER 24, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, BRIAN
1200 RIVERPLACE BOULEVARD, SUITE 902
JACKSONVILLE FL 32207

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. \$100,000.00

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 # P99000031379
NAME LONGLEAF TIMBER COMPANY, INC.
STREET ADDRESS 1200 RIVERPLACE BOULEVARD, SUITE 902
CITY-ST-ZIP JACKSONVILLE FL 32207

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

8/20/03

904-393-9020

Date

Daytime Phone #

CP2E003 (4/03)

292

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03 SEP 17 AM 8:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 16, 2003

Florida Department of Revenue
P. O. Box 6327
Tallahassee, FL 32314

Re: Hansen Pasture Properties, Ltd. -
Ref# A02000001688

Dear Sir or Madam:

After speaking with your office, I understand the reason for the late fee charge is due to this report being a second notice. However, I explained that this was the only notice that we had received. I was advised to send a letter stating that fact and the fee would be omitted.

Thank you in advance for your help in this matter.

Sincerely,



Brian Brown