

2001 UNIFORM BUSINESS REPORT (UBR)

0012570 AF

DOCUMENT # **A07392**

1. Entity Name

TAFF PROPERTIES LTD.

Principal Place of Business

C/O JOYCE C. MILLENDER, CPA
4432 CRAWFORDVILLE HWY.
CRAWFORDVILLE FL 32327

Mailing Address

C/O JOYCE C. MILLENDER, CPA
4432 CRAWFORDVILLE HWY.
CRAWFORDVILLE FL 32327

FILED

01 APR 17 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1994397

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

LAWHON, OLETA T.
HIGHWAY C-375
(P.O. BOX 248)
SOPCHOPPY FL 32358

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.

SIGNATURE

Oleta T. Lawhon

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions

\$425,000.00

10. Amount of Capital Contributions

in FLORIDA to date

11. MAKE CHECK PAYABLE TO 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
STREET ADDRESS
CITY - ST - ZIP
TAFF, STEVE G.
2074 DEELWOOD DRIVE
TALLAHASSEE FL

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
TAFF, GEORGE S
2912 THOMASVILLE RD.
TALLAHASSEE FL

STREET ADDRESS

CITY - ST - ZIP

700004103777--4
-05/01/01--01108--003
******526.25 ****526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
TAFF, HOUSTON E.
RT. 3, BOX 68
CRAWFORDVILLE FL

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
LAWHON, OLETA T
P.O. BOX 248 (HWY C-375)
SOPCHOPPY FL 32358

STREET ADDRESS

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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:

Oleta T. Lawhon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)