

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0006362 AT

DOCUMENT.# A10015

1. Entity Name
V.P.I. PROPERTIES ASSOCIATES, LTD.



FILED

03 MAR 25 PM 1:56

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

Principal Place of Business
2201 CORPORATE SQUARE BOULEVARD
JACKSONVILLE FL 32216

Mailing Address
2201 CORPORATE SQUARE BOULEVARD
JACKSONVILLE FL 32216

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 11-2513484

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DUE BY MAY 1, 2003

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSETTA, VICTOR
2201 CORPORATE SQUARE BLVD.
JACKSONVILLE FL 32216

Name
American Technical Ceramics (Florida), Inc.
Street Address (P.O. Box Number is Not Acceptable)
Attention: Kathleen M. Kelly
2201 Corporate Square Blvd.
City Jacksonville FL Zip Code 32216

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. American Technical Ceramics (Florida), Inc.

SIGNATURE By: Kathleen M. Kelly
Signature, typed or printed name of registered agent and title if applicable.

DATE 3/7/03

9. Capital Contributions
as Shown on record. \$998,200.00

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 #
NAME INSETTA, VICTOR D
STREET ADDRESS 8444 SAN JOSE BLVD.
CITY-ST-ZIP JACKSONVILLE FL 32216

STREET ADDRESS
CITY-ST-ZIP 600014593076
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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

V.P.I. Management Co., LLC, General Partner

SIGNATURE:

By: SIGNATURE REQUIRED

3-24-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Victor D. Insetta

Date

Daytime Phone #

CR2E003 (10/02)