

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A20683

1. Entity Name
WILCOX HOLDINGS, LTD.



FILED
14 APR 2005 APR 12 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
267 JOHN KNOX ROAD
SUITE 100
TALLAHASSEE, FL 32303

Mailing Address
267 JOHN KNOX ROAD
SUITE 100
TALLAHASSEE, FL 32303

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04072005 Chg-LP CR2E003 (10/03)

4. FEI Number
59-2651871

Applied For
Not Applicable

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

WILCOX, W. EUGENE
267 JOHN KNOX ROAD
SUITE 100
TALLAHASSEE, FL 32303

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

W. Eugene Wilcox

DATE

9. Capital Contributions
as Shown on record. \$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # L04000068759
NAME WILCOX MANAGEMENT GROUP, LLC
STREET ADDRESS 267 JOHN KNOX RD SUITE 100
CITY-ST-ZIP TALLAHASSEE, FL 32303

STREET ADDRESS

CITY-ST-ZIP

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000054286770
05/11/05--01043--016 **191.25

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