2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

A24998 **DOCUMENT #**

1. Entity Name RODGERS PROPERTIES, LTD.



Principal Place of Business 2333 E. SILVER SPRINGS BOULEVARD OCALA FL 32670

Mailing Address 2333 E. SILVER SPRINGS BOULEVARD **OCALA FL 32670**

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



2. Principal Place of Business			3. Mailing Address			T 1001013 1010 11013 B1656 S6510 10101 1011 01013 01013 61013 61013 01011 01011 01013 1001				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2003				
City & State			City & State			4. FEI Number	59-2835250			Applied For Not Applicable
Zip Country			Zip Country					8.75 ee Requ	Additional	
	6. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent					
	S, MICHAEL			,	Name Street Address (P.O. Box Number is Not Acceptable)					
	E SHORE () FL 32803	DUIAC							<u> </u>	
			· · · · · · · · · · · · · · · · · · ·		City			FL	Zip C	
	named entit tions of regist	y submits this statement fo tered agent.	r the purpose of ch	anging its register	red office or regis	stered agent, or both,	, in the State of Flor	ida. I am fa	miliar wi	th, and accept
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable.					DATE		<u> </u>
9. Capital Contributions as Shown on record. \$10,000.00					Itributions 11. MAKE CHECK PAYABLE TO FL. DEPT. 0 SEE REVERSE SIDE FOR FEE INFORMA					
		GENERAL PARTNER 1 : General Partners MA	Y NOT be chang	ged on the forn	n; an amendm		to change a ge	neral parti		
12.	GENERAL PARTNER INFORMATION			13.	13. ADDRESS CHANGES ONLY					
DOCUMENT # NAME	RODGERS	S, WILLIAM J. JR. ILVER SPRNG BLV		STR	REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	OCALA FI			CITY	Y-ST-ZIP					
DOCUMENT # NAME		, MICHAEL D.		STR	EET ADDRESS	·	<u> </u>			
STREET ADDRESS CITY-ST-ZIP	2512 LAKE SHORE DRIVE ORLANDO FL 32803				Y-ST-ZIP	100910402511				
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14I.hereby.d	ertify that the	information supplied with	this filing does not	qualify for the exe	emption stated in e legal effect as i	Section 119.07(3)(i),	Florida Statutes, I	further certif	y that the	e information

the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: