2003 LIMITED PARTNERSHIP

	IIFUK	M DOSIM	ESS REPOR	i (UBK)				Ŗ
DOCU	MENT	# A2655	1] FILED		₹
1. Entity Name OLIVER-JACKSONVILLE ASSOCIATES, LTD.					2003 J	AN 14 AM 10: 28		Œ
,	to the second	the state of the s	W .	W. Control	011/1/2101	LOF CORPORATION MHASSEE, FLORIDA	1 S	
Principal Place	ce of Busines	Start Fig.	Mailing Address 707 SELMA AVE.		TALL/	AHASSEE, FLORIDA		•
SELMA AL 36			SELMA AL 36701			(•)		
2. Principal I	Place of Busir		3. Mailing Address 241 Co RJ 486			- I THE HOLL THE TRAIN CHAIL CHAIL CLIAL CHAIL THE CHOIL CLOCK CHAIL CHAIL CHAIL CHAIL CHAIL CHAIL CHAIL CHAIL		
Suite, Apt	t. #, etc.	Who is a second	Suite, Apt. #, etc.			DUE BY MAY 1, 200)3	
City & State MINTER AL		City & State MINICA, M2.		4. FEI Number	Applied For Not Applied For Not Applied For		<u> </u>	
3676		Country USA	36761	Country US#	5. Certificate of S	Factors Desired F	8.75 Additional ee Required	
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent Name			
POPE, WILLIAM A 1708 OLD HIGHWAY 98 DESTIN_FL 32541				Street Add	Street Address (P.O. Box Number is Not Acceptable)			
				City	FL Zip Code			
	e named entity		r the purpose of changing its	registered office or reg	gistered agent, or both, in	the State of Florida. I am fa	ımiliar with, and accept	
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions \$100.00 10. Amount of Capital (al Contributions		DATE 11. MAKE CHECK PAYABLE T	O FL. DEPT. OF STATE	
as Shown	on record.	·	in FLORIDA to da		GISTERED AND ACT	SEE REVERSE SIDE FOR		
12.	NOTE:	General Partners MA	Y NOT be changed on the	ne form; an amend	ment must be filed to	change a general part	ner.	
DOCUMENT #	OLIVER, HOWARD C. 707 SELMA AVE.			STREET ADDRESS	TANDECC			(20/
NAME STREET ADDRESS				074 07 70	241 CO RJ	986		ΙĔ
CITY-ST-ZIP	SELMA AL	36701		■ GHY-St-7P	1 - "			ဗ
DOCUMENT #			- 11	CITY-ST-ZIP	MINTER AL	36761		R2E003
NAME	OWENS, P			STREET ADDRESS	MINIER MI	36761		CR2E003 (10/02)
	OWENS, P LEIGH PLA BREWTON	CE			MINIER HI	36761		CR2E003
NAME STREET ADDRESS	LEIGH PLA	CE		STREET ADDRESS	MINIER HI	36761		CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #	LEIGH PLA	CE		STREET ADDRESS CITY-ST-ZIP	MINIER HI	36761		CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS		3676/ 3676/ 3676/ 3676/ 3676/ 3676/ 3676/ 3676/ 3676/	A1. 25	CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS			T41. 25	CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP			T41. 25	CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DOCUMENT # NAME	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS			F41. 25	CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # DOCUMENT # DOCUMENT #	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP			P41. 25	CR2E003
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	LEIGH PLA	CE AL 36427		STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS			F41. 25	CR2E003

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: