

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # A28368**

1. Entity Name

**HUGH CORRIGAN, III, FAMILY LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 AUG 10 AM 10:02



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
7150 20TH STREET, SUITE E  
VERO BEACH FL 32966

Mailing Address  
7150 20TH STREET, SUITE E  
VERO BEACH FL 32966

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0164947

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

**JACKSON, ROBERT  
2165 - 15TH AVENUE  
VERO BEACH FL 32960**

Name  
**Steve L. Henderson**

Street Address (P.O. Box Number is Not Acceptable)  
**817 Beachland Boulevard**

City, State & Zip  
**Vero Beach, Florida**

City  
**Vero Beach**

FL

Zip Code  
**32963**

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

8/7/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

**\$6,452,385.00**

10. Amount of Capital Contributions in FLORIDA to date.

**\$6,452,385.00**

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  
**CORRIGAN, HUGH, III  
7150 - 20TH ST., STE E  
VERO BEACH FL**

STREET ADDRESS  
CITY-ST-ZIP  
**100003359931--6  
-08/17/00--01001--027  
\*\*\*926.25 \*\*\*926.25**

DOCUMENT #  
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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:

**Steve L. Henderson**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7-24-2000 915-687-0051  
Date Daytime Phone #

CR2E003 (5/00)