2002 UNIFORM BUSINESS RE	EPORT (UBR)
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2002 UNIFORM BUSINESS REPORT (UBR)							APPROVI.		
DOCUMENT # A28670 1. Enlity Name					•		<u>-</u>	AND FILED	
TAYLOR CREEK ASSOCIATES, LTD.						02 APR - 1 PM 1:48			
PO BOX 220461 P.O			P.O. BO	Mailing Address P.O. BOX 78915 CHARLOTTE NC 28271				SECRETARY OF STATE TABLE HASSEE, FLORIDA	
Principal Place of Business 3. Mailing Address			·						
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.				DUE BY MAY 1, 2002	
City & State City & S			State			-	4. FEI Number 65-0129505 Applied For Not Applied by		
Zip		Country	Zip	The state of the s	Count	iry		5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name	and Address of Current	Registered .	Agent		7. Name and Address of New Registered Agent			
ABERNA1	THY, BRUCE	E R., JR.				Name 			
900 VIRG		ROFESSIONAL CTR.				Street Add	dress (F	P.O. Box Number is Not Acceptable)	
SUITE 6	TE EL 24000	,							
FT. PIERCE FL 34982				City FL Zip Code					
8. The above named entity submits this statement for the purpose of changing its registered office or registered SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. 10. Amount of Capital Contributions in FLORIDA to date						DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE			
23 0104/11	A G	ENERAL PARTNER T	HAT IS A	in FLORIDA to date BUSINESS ENTI	ITY MI	JST BE RE	GIST	SEE REVERSE SIDE FOR FEE INFORMATION ERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.	
12.		GENERAL PARTNER			13.	, an amend	ument	ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	819207 HOLLAND CONSTRUCTION CO. INC. 340 WEDDINGTON-MARVIN RD WEDDINGTON NC			T ADDRESS ST-ZIP					
DOCUMENT #					STREE	T APDRESS	.	9000052049799	
STREET ADDRESS CITY-ST-ZIP					CITY-	ST-ZIP -		-04/03/0201049023 ****526.25 ****526.25	
OOCUMENT #					STREE	T ADDRESS			
STREET ADDRESS SITY-ST-ZIP					CITY-S	ST-ZIP			
OCUMENT #					STREE	T ADDRESS			
TREET ADDRESS					CITY-S	ST-ZIP			
OCUMENT # IAME		•			STREET	T ADDRESS			
TREET ADDRESS					CITY-S	ST-ZIP			
OCUMENT #					STREET	ADDRESS			
TREET ADDRESS					CITY-S	ST-ZIP			
4. Thereby of	ertify that the	information supplied with	this filing doe	es not qualify for the	e exem	ption stated	in Sect	tion 119.07(3)(i), Florida Statutes. I further certify that the information	

SIGNATURE: _