

2001 UNIFORM BUSINESS REPORT (UBR)

0013298 AF

DOCUMENT # **A30189**

1. Entity Name

MARK I PARTNERS, LTD.

FILED

Principal Place of Business

7355 S.W. 9TH STREET
VERO BEACH FL 32968

Mailing Address

7355 S.W. 9TH STREET
VERO BEACH FL 32968

01 APR 20 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0203995

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

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

GORDON, WILLIAM J.
7355 S.W. 9TH STREET
VERO BEACH FL 32968

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record.

\$3,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

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 **GORDON, WILLIAM J.**
STREET ADDRESS **7355 S.W. 9TH STREET**
CITY-ST-ZIP **VERO BEACH FL**

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME **HAMNER, GEORGE F., JR.**
STREET ADDRESS **7355 S.W. 9TH STREET**
CITY-ST-ZIP **VERO BEACH FL**

STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

W. J. Gordon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/9/01 561/110-0042
Date Daytime Phone #

CR2E003 (11/00)