

2001 UNIFORM BUSINESS REPORT (UBR)

0009816 AF

DOCUMENT # **A93000000018**

1. Entity Name

ADCOX ENTERPRISES, LTD.

Principal Place of Business

**611 HERCHEL DRIVE
TEMPLE TERRACE FL 33617**

Mailing Address

**611 HERCHEL DRIVE
TEMPLE TERRACE FL 33617**

FILED

01 APR 20 PM 12:12

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3155351

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

**ADCOX, WILLARD T
611 HERCHEL DRIVE
TEMPLE TERRACE FL 33617**

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

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.

\$5,000,000.00

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.

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

**ADCOX, WILLARD T
611 HERCHEL DRIVE
TEMPLE TERRACE FL 33617**

STREET ADDRESS

CITY-ST-ZIP

Willard & Mildred Adcox

12401 N. 22nd Street

Apt. #G304

Tampa, FL 33612

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

**ADCOX, MILDRED T
611 HERCHEL DRIVE
TEMPLE TERRACE FL 33617**

STREET ADDRESS

CITY-ST-ZIP

Willard & Mildred Adcox

12401 N. 22nd Street

Apt. #G304

Tampa, FL 33612

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

**SUTTON, JENNIFER J
17325 LINDA VISTA CIRCLE
LUTZ FL 33549**

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)(l), 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:

Willard & Mildred Adcox, Gen. Partner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)