

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000001551

1. Entity Name  
THE M.L. SPALDING LIMITED PARTNERSHIP



FILED

03 APR 15 PM 3:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
2301 E. LK. HARTRIDGE DR.  
WINTER HAVEN FL 33881

Mailing Address  
2301 E. LK. HARTRIDGE DR.  
WINTER HAVEN FL 33881



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 59-3280317

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

SPALDING, W T III  
2301 E. LK. HARTRIDGE DR.  
WINTER HAVEN FL 33881

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions  
as Shown on record.

\$8,000,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$8,000,000

11. MAKE CHECK PAYABLE TO FL. 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
	W.T. SPALDING, III, CO-TRUSTEE	2301 E. LK. HARTRIDGE DR.	WINTER HAVEN FL 33881
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARC GRIFFIN SPALDING, CO-TRUSTEE	1900 MOSELEY AVE.	PALATKA FL 32077
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	JOHN CAMPBELL SPAULDING, CO-TRUSTEE	RT. 1 BOX 108	BUNNELL FL 32110
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARGARET HUTT SPALDING MCNAB, CO-TRUSTEE	P.O. BOX 1230	FLAGLER BEACH FL 32136
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	SPALDING, W. T III	1815 HUNTINGTON AVENUE	JACKSONVILLE FL 32223
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	SPALDING, MARC GRIFFIN	1900 MOSELEY AVENUE	PALATKA FL 32077

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	900016066169
CITY-ST-ZIP	04/15/03--U1034--U10 **526.28
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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:

*Signature of W.T. Spalding III*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

WILLIAM T. SPALDING III

Date

Daytime Phone #

863-294-8127

CR2E003 (10/02)