

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000001879**

1. Entity Name

**PAUL W. WILLS I AND RUTH L. WILLS FAMILY LIMITED  
PARTNERSHIP**

FILED

02 MAR 26 PM 3: 24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

P.O. BOX 381268  
BIRMINGHAM AL 35238

Mailing Address

C/O WALTHAM, DRAKE & WALLACE  
1621 EUCLID AVE., SUITE 1300  
CLEVELAND OH 44115



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**DUE BY MAY 1, 2002**

4. FEI Number

**65-0541142**

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

**PRICE, MARK J ESQUIRE  
% ROETZEL & ANDRESS, LPA  
850 PARK SHORE DRIVE, TRIANON CTR/ 3RD FL  
NAPLES FL 33940**

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.

DATE

9. Capital Contributions  
as Shown on record.

**\$1,205,110.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$1,205,110.00**

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 # **P93000001164**  
NAME **AIRCRAFT SALES, INC.**  
STREET ADDRESS **1112 HIGHLAND LAKES CIRCLE**  
CITY-ST-ZIP **BIRMINGHAM AL 35242**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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STREET ADDRESS

CITY-ST-ZIP

**100005181271--6**  
**-04/02/02-01012-013**  
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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

**Paul W. Wills, President, Aircraft Sales, Inc.**

SIGNATURE:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER**

Date

Daytime Phone #

**3/21/02 2059950028**

0019679 AB

CR2E003 (9/01)

STAPLE CHECK HERE