

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000001882

1. Entity Name

BRINKLEY FAMILY PARTNERSHIP, LTD.

FILED

00 JAN 18 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
ROUTE 31, BOX 156
TALLAHASSEE FL 32312

Mailing Address
ROUTE 31, BOX 156
TALLAHASSEE FL 32312-3831

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2087752

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WARFEL, TIMOTHY J
2120 KILLARNEY WAY
TALLAHASSEE FL 32308

Name
WILMA A. LAUDER
Street Address (P.O. Box Number is Not Acceptable)
Rt. 31, Box 156
Tallahassee
City
FL Zip Code
32312

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

Wilma A. Lauder

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

(NOTE: Registered Agent signature required when reinstating)

1-8-00

DATE

9. Capital Contributions
as Shown on record.

\$1,188,450.45

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 #	P94000094296
NAME	BRINKLEY FAMILY CORPORATION, INC.
STREET ADDRESS	ROUTE 31, BOX 156
CITY - ST - ZIP	TALLAHASSEE FL 32312
DOCUMENT #	
NAME	
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CITY - ST - ZIP	
DOCUMENT #	
NAME	
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-02/24/00--01001--020
****526.25 ****526.25

500003109715--2
-01/25/00--01040--020
****526.25 ****526.25

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, the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

WILMA A. LAUDER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-8-00

Date

850/488-411

Daytime Phone #