

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000000189**

1. Entity Name

THE 1995 NEWTON FAMILY LIMITED PARTNERSHIP

Principal Place of Business

**THE HASKELL BLDG.
111 RIVERSIDE AVE., STE. 140
JACKSONVILLE FL 32202**

Mailing Address

**POST OFFICE BOX 52898
JACKSONVILLE FL 32201-2898**

FILED
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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

200 W. Forsyth St.

3. Mailing Address

Suite, Apt. #, etc.

Suite 1600

**City & State
Jacksonville, FL**

City & State

**Zip
32202**

Country

4. FEI Number **59-3278171**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NEWTON, RUSSELL B JR.
THE HASKELL BLDG.
111 RIVERSIDE AVE., STE. 140
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
200 W. Forsyth St.

Suite 1600

City Jacksonville, FL Zip Code 32202

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 *Russell B Newton*

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

(NOTE: Registered Agent signature required when reinstating)

2/22/01

DATE

9. Capital Contributions as Shown on record. **\$10,046,046.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$9,947,114.10**

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

DOCUMENT #
NAME **NEWTON, RUSSELL B JR.**
STREET ADDRESS **111 RIVERSIDE AVE., STE. 140**
CITY-ST-ZIP **JACKSONVILLE FL 32202**

DOCUMENT #
NAME **NEWTON, RUSSELL B. JR. TRUSTEE**
STREET ADDRESS **111 RIVERSIDE AVE., STE. 140**
CITY-ST-ZIP **JACKSONVILLE FL 32202**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **200 W. Forsyth St., Suite 1600**
CITY-ST-ZIP **Jacksonville, FL 32202**

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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

SIGNATURE: *Russell B Newton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Russell B. Newton, Jr.

2/22/01 (904) 356-1739
Date Daytime Phone #

0000369 AF

CR2E003 (11/00)