

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A96000000386**

1. Entity Name
JANCLARK, LTD.

FILED

00 MAR 30 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 321 INDIAN HARBOR RD. VERO BEACH FL 32963
Mailing Address: 321 INDIAN HARBOR RD. VERO BEACH FL 32963-3510

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0646729** 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

DAUGHERTY, ALFRED C
321 INDIAN HARBOR ROAD
VERO BEACH FL 32963

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$403,368.57** 10. Amount of Capital Contributions in FLORIDA to date. **\$644,085.57** 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 # NAME STREET ADDRESS CITY - ST - ZIP	DAUGHERTY, ALFRED C 321 INDIAN HARBOR ROAD VERO BEACH FL 32963	STREET ADDRESS CITY - ST - ZIP	FF \$26.25 900003165829--8 -03/10/00--01113--004 ***141.25 ***141.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	DAUGHERTY, JANET E 321 INDIAN HARBOR ROAD VERO BEACH FL 32963	STREET ADDRESS CITY - ST - ZIP	900003165829--8 04/05/00--01014--020 ***385.00 ***385.00
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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: **Alfred C. Daugherty** **ALFRED C. DAUGHERTY** 02.28.00 561-231-1276
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)