

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000001715

1. Entity Name

JOHN H. PHIPPS LIMITED PARTNERSHIP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 26 AM 3:05

Principal Place of Business  
3110 CAPITAL CIRCLE, N.E.  
TALLAHASSEE FL 32308

Mailing Address  
3110 CAPITAL CIRCLE, N.E.  
TALLAHASSEE FL 32308-3706



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3401577

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

BOYLE, DENNIS O  
3110 CAPITAL CIRCLE, N.E.  
TALLAHASSEE FL 32308

Name Phipps Ventures, Inc.

Street Address (P.O. Box Number is Not Acceptable)  
3110 Capital Circle NE

City Tallahassee FL Zip Code 32308

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

By: DAVID E. WILSON, VP

4/25/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$20,203,030.00

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 # P96000054527  
NAME PHIPPS VENTURES, INC.  
STREET ADDRESS 3110 CAPITAL CIRCLE, N.E.  
CITY - ST - ZIP TALLAHASSEE FL 32308

STREET ADDRESS 788883268297 4  
CITY - ST - ZIP -05/22/00 -01005 -016  
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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:

PHIPPS VENTURES, INC., GEN. PARTNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CF2E03 (9/99)