

2001 UNIFORM BUSINESS REPORT (UBR)

0002364 AF

DOCUMENT # A96000001739

1. Entity Name

L. P. HAGAN, JR. FAMILY LIMITED PARTNERSHIP

Principal Place of Business
108 EAST CENTRAL BLVD.
ORLANDO FL 32801

Mailing Address
921 ASHINGTON PLACE
ORLANDO FL 32804

FILED

01 MAR 26 PM 1:07

SECRETARY OF STATE
TALL



DO NOT WRITE IN THIS SPACE

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 59-3258931

Applied For

Not Applicable

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

MCEWAN, JOHN S II
108 EAST CENTRAL BLVD.
ORLANDO FL 32801

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$1,639,440.00

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 #
NAME HAGAN, L P JR.
STREET ADDRESS 921 ASHINGTON PLACE
CITY-ST-ZIP ORLANDO FL 32804

STREET ADDRESS

CITY-ST-ZIP

100002931401--7
-03/30/01--01058--009
****526.25 ****526.25

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CITY-ST-ZIP

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:

L P Hagan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/27/01

Date

407-4223071

Daytime Phone #

CR2E003 (11/00)