

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # A97000000049**

1. Entity Name  
**GREENE PARTNERS, LTD.**

FILED

00 JAN 31 PM 1:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
2075 38TH AVENUE  
VERO BEACH FL 32960

Mailing Address  
2075 38TH AVENUE  
VERO BEACH FL 32960-2450

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

DO NOT WRITE IN THIS SPACE  
CORRECT FEI# 65-0721397

4. FEI Number **65-0724829-**  
65-0721397

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

GREENE, GRIFFIN A  
2075 38TH AVENUE  
VERO BEACH FL 32960

**7. Name and Address of New Registered Agent**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$176,000.00**

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	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>A18544 GREENE GROVES &amp; RANCH, LTD. 2075 38TH AVENUE VERO BEACH FL 32960</b>
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>300003122203--4</b>
CITY - ST - ZIP	<b>-02/03/00--01043--013 ****526.25 ****526.25</b>
STREET ADDRESS	
CITY - ST - ZIP	
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STREET ADDRESS	
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:** *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

C-1001 (3/97)