

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000001359

1. Entity Name

THE P. BENTON LIMITED PARTNERSHIP #1

FILED

00 JAN 19 PM 12:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

P.O. BOX 1589, 4025 SHORE LANE  
BOCA GRANDE FL 33921

Mailing Address

P.O. BOX 1589, 4025 SHORE LANE  
BOCA GRANDE FL 33921-1589

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

31-1550932

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

BENTON, PHILIP E JR.

4025 SHORE LANE

BOCA GRANDE FL 33921

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

*Philip E. Benton, Jr.* *Philip E. Benton, Jr.* *1/19/00*

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.

\$2,500,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

*2,500,000.00*

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

BENTON, PHILLIP E JR.

P.O. BOX 1589, 4025 SHORE LANE  
BOCA GRANDE FL 33921

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

BENTON, MARY ANN

P. O. BOX 1589, 4025 SHORE LANE  
BOCA GRANDE FL 33921

STREET ADDRESS

CITY - ST - ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*Philip E. Benton, Jr.* *941-964-276* *1/19/00*

Daytime Phone #