

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002149

1. Entity Name

DUKE FAMILY RANCH LIMITED PARTNERSHIP

Principal Place of Business

ATTN: MRS. JOANNE H. DUKE
11050 OLD TAMPA ROAD
PARRISH FL 34219

Mailing Address

ATTN: MRS. JOANNE H. DUKE
11050 OLD TAMPA ROAD
PARRISH FL 34219

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED
01 FEB 27 AM 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0786567

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

PORGES, GREGORY J
C/O HARLLEE/PORGES/HAMLIN/KNOWLES/BALD &
1205 MANATEE AVENUE WEST
BRADENTON FL 34205

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.

\$4,000,000.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
DUKE, JOSEPH E
11050 OLD TAMPA RD.
PARRISH FL 34219

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
DUKE, JOANNE H
11050 OLD TAMPA RD.
PARRISH FL 34219

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
DUKE, JOSEPH E JR.
4807 1ST AVENUE DRIVE NW
BRADENTON FL 34209

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
CHESTON, LAURA GRACE
105 LUDGATE COURT
MORRISVILLE NC 27560

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
DUKE, SUSAN DIANE
4703 KIN ROSS COURT
VALRICO FL 33594

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
MORRISON, DONNA ELIZABET
4407 WATROUS AVENUE
TAMPA FL 33629

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/22/01

Date

941 776 2552

Daytime Phone #

0015015 AF

CR2E003 (11/00)