

2001 UNIFORM BUSINESS REPORT (UBR)

0001426 AF

DOCUMENT # **A98000000176**

1. Entity Name

WORTHWHILE DEVELOPMENT VI, LTD.

FILED

01 APR 24 AM 7:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2949 W. STATE ROAD 434
SUITE 400
LONGWOOD FL 32779

Mailing Address

2949 W. STATE ROAD 434
SUITE 400
LONGWOOD FL 32779

2. Principal Place of Business

2933 W SR 434

Suite, Apt. #, etc.

Suite 101, etc.

City & State

3. Mailing Address

2933 W SR 434

Suite, Apt. #, etc.

Suite 101, etc.

City & State

4. FEI Number

59-3523183

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

ROYALL, H J JR.

2949 W. STATE ROAD 434

SUITE 400

LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2933 W SR 434

Suite, 101, etc.

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.

President of the General Partner

4/17/01

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$9.90

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 # P98000005134
NAME WORTHWHILE DEVELOPMENT VI, INC.
STREET ADDRESS 2949 W. STATE ROAD 434
CITY-ST-ZIP LONGWOOD FL 32779

13. ADDRESS CHANGES ONLY

STREET ADDRESS

2933 W SR 434, Ste 101, etc.

CITY-ST-ZIP

STREET ADDRESS

500004163965-4

CITY-ST-ZIP

-05/09/01--01010--001

****150.00 ****150.00

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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

H.J. Royall, Jr., President of the General Partner

4/19/01 407-774-0303

Date

Daytime Phone #

CR2E003 (11/00)