## 2001 UNIFORM BUSINESS REPORT (UBR)

				• •				ì	
DOCU 1. Entity Nam	MENT # A9800	00001224					<b>A</b>	·	
LLOYD P	PROPERTIES, LTD.			FI	LED	_γ	$\forall$		
Principal Place of Business Mailing Address				0	T FEB	21 AM 10: 34		Ü	
20. 000 0200			201 SOUTH SECOND STREET SEC FORT PIERCE FL 34948-4382 TALL		SECRETA ALLAHAS	RY OF STATE ISEE, FLORIDA	18112 <b>8</b> 8121 <b>88</b> 312 <b>68</b> 1	NI 31810 11310 1383 8181 1883	
Principal Place of Business     3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat	e	City & State			4. FE	65-084881	0	Applied For Not Applicable	
Zip Country		Zip	Cour	Country		rtificate of Status Desired	, L	88.75 Additional ee Required	
	6. Name and Address of Curren	t Registered Agent		Name	7. Na	me and Address of Nev	Hegistered A	gent	
LLOYD, VINCENT A				Street Address (P.O. Box Number is Not Acceptable)					
201 SOUTH SECOND STREET FORT PIERCE FL 34948-4382									
				City			FL	Zip Code	
SIGNATURE .		nt and title if applicable. (NO	OTE: Registere	ed Agent signature re		tating)	DATE	TO DEPT. OF STATE FEE INFORMATION	
as Shown	on record.	THAT IS A BUSINESS E	NTITY N	MUST BE REC	GISTERED	AND ACTIVE WITH T	HIS OFFICE.		
12.	GENERAL PARTNI		13.		ment mast		HANGES ONL		
DOCUMENT # NAME	LLOYD, VINCENT A			EET ADORESS		1000037687315 -02/26/0101151008			
STREET ADDRESS CITY-ST-ZIP	1109 FERNANDINA STREET FORT PIERCE FL 34949		cit	Y-ST-ZIP		***	±526.25	****526.25	
DOCUMENT # NAME STREET ADDRESS	LLOYD, IAN T 1109 FERNANDINA STREET			EET ADDRESS					
CITY-ST-ZIP DOCUMENT #	FORT PIERCE FL 34949			Y-ST-ZIP	·····		• • •		
NAME STREET ADDRESS	LLOYD, COLIN V. 1109 FERNANDINA STREET			Y-ST-ZIP			<del>.</del>		
DOCUMENT #	FORT PIERCE FL 34949	·	STR	EET ADDRESS					
STREET ADORESS CITY-ST-ZIP			Cir	Y-ST-ZIP					
DOCUMENT / NAME			STR	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			Cit	Y-ST-ZIP					
DOCUMENT #  NAME   STREET ADDRESS			STR	EET ADDRESS		···			
CITY-ST-ZIP	certify that the information expelled will	th this filing does not qualify f		Y-ST-ZIP	in Section 11	9.07(3)(i). Florida Statute	s. I further certi	fy that the information	
indicated the receiv	certify that the information supplied w I on this report is true and accurate a ver or trustee empowered to execute t	d that my signature shall have his report as required by Cla	e the sam pter 620,	ie legal effect a Florida Statute	is if made und	der oath; that I am a Gen	eral Partner of t	he limited partnership or	
SIGNAT	TURE: SIGNATURE AND TYPED O	MRECESTION OF PRINTED NAME OF SIGNING GENE	REPARTN	() / ER		2/15/01 Date		- 464 - 4600 vitime Phone #	

Vincent A. Lloyd