

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0005618 AT

DOCUMENT # A98000001541



FILED

03 APR -8 AM 7:13

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

MJH



1. Entity Name
GORDON-MILLS MILES LIMITED PARTNERSHIP

Principal Place of Business
77 PARK PLACE
ST. AUGUSTINE FL 32084

Mailing Address
77 PARK PLACE
ST. AUGUSTINE FL 32084

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number 59-3523347

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

UPCHURCH, DAVIS JR.
1510. NORTH PONCE DE LEON. BLVD.
ST. AUGUSTINE FL 32085

Name
Rosalie Gordon Mills

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

77 Park Place

City St. Augustine **FL** **Zip Code** 32084

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Rosalie Gordon-Mills*

04/04/03

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$2,500,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # P98000055977
NAME RUDCARLIE, INC.
STREET ADDRESS 77 PARK PLACE
CITY-ST-ZIP ST. AUGUSTINE FL 32084

STREET ADDRESS
CITY-ST-ZIP 500013734505
03/10/03--01076--017 **437.50

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP 500013734505
04/08/03--01031--024 **97.50

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
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 *Rosalie Gordon-Mills* Rosalie Gordon-Mills, Pres.
Rudcarlie, Inc., Gen. Ptr. 03/06/03 904-824-1801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

SAMPLE CHECK HERE