

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **A98000001555**

1. Entity Name

TIMUCUAN ASSET MANAGEMENT LTD.

Principal Place of Business

**111 RIVERSIDE AVENUE, SUITE 140
JACKSONVILLE FL 32202**

Mailing Address

**111 RIVERSIDE AVENUE, SUITE 140
JACKSONVILLE FL 32202**

FILED

01 FEB 27 AM 9:37

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

200 W. Forsyth St.

3. Mailing Address

200 W. Forsyth St.

Suite, Apt. #, etc.

Suite 1600

Suite, Apt. #, etc.

Suite 1600

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

65-0896297

Applied For

Not Applicable

Zip

32202

Country

Zip

32202

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NEWTON, RUSSELL B III
111 RIVERSIDE AVENUE, SUITE 140
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
200 W. Forsyth St.

Suite 1600

City

Jacksonville

FL

Zip Code
32202

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

Russell B. Newton III

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-21-01

9. Capital Contributions
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$1,000.00

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

DOCUMENT # **L38604**
NAME **TIMUCUAN ASSET MANAGEMENT, INC.**
STREET ADDRESS **111 RIVERSIDE AVENUE, SUITE 140**
CITY-ST-ZIP **JACKSONVILLE FL 32202**

13. ADDRESS CHANGES ONLY

STREET ADDRESS **200 W. Forsyth St., Suite 1600**
CITY-ST-ZIP **Jacksonville, FL 32202**

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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:

Russell B. Newton III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Russell B. Newton, III

2-21-01

Date

(904) 356-1739

Daytime Phone #

CR2E003 (11/00)