

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000002309

1. Entity Name
VESTCOR FUND XVI, LTD.

Principal Place of Business
**3030 HARTLEY ROAD, SUITE 100
JACKSONVILLE FL 32257**

Mailing Address
**3030 HARTLEY ROAD, SUITE 100
JACKSONVILLE FL 32257-8207**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -9 PM 4:13



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
**3020 Hartley Road
Suite, Apt. #, etc.
300**

3. Mailing Address
**3020 Hartley Road
Suite, Apt. #, etc.
300**

City & State
Jacksonville, Florida

City & State
Jacksonville, Florida

4. FEI Number **59-3535911**

Applied For
Not Applicable

Zip
32257

Country
US

Zip
32257

Country
US

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VESTCOR PARTNERS XVI, INC.
3030 HARTLEY ROAD, SUITE 100
JACKSONVILLE FL 32257**

7. Name and Address of New Registered Agent

Name
Vestcor Partners XVI, Inc.
Street Address (P.O. Box Number is Not Acceptable)
3020 Hartley Road, Suite 300
City
Jacksonville FL Zip Code
32257

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. **\$1,717,955.00**

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

DOCUMENT # **P98000085572**
NAME **VESTCOR PARTNERS XVI, INC.**
STREET ADDRESS **3030 HARTLEY ROAD, SUITE 100**
CITY - ST - ZIP **JACKSONVILLE FL 32257**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS **3020 Hartley Road, Suite 300**
CITY - ST - ZIP **Jacksonville, Florida 32257**

STREET ADDRESS
CITY - ST - ZIP
**100003136491--1
-02/15/00--01118--019
****\$35.00 ****\$35.00**

STREET ADDRESS
CITY - ST - ZIP

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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

Vestcor Partners XVI, Inc., Its General Partner

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-20-00 (904)260-3030
Date Daytime Phone #