2000 UNIFORM BUSINESS REPORT (UBR)

	<u>, </u>	Chin Dog		.00 1121 0		100111	2	-	
DOCUMENT # A9800002336 1. Entity Name							FILED		
HAYDEN LANE III, LTD.						SECKETARY OF STATE DIVISION OF CORPORATIONS			
1320 33RD STREET WEST 1320 33R				iling Address 120 33RD STREET WES NLMETTO FL 34221-6230		· .	00 APR 28 AM 3: 05		
2. Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc					·		DO NOT WRITE IN THIS SPACE		
City & State				City & State			65-08/0833	pplied For lot Applicable	
Zip				Zip Counti		try	5. Certificate of Status Desired		
	6. Name	and Address of Current	Regist	ered Agent		Name	7. Name and Address of New Registered Agent		
PRESTON, WHITING H						Street Address (P.O. Box Number is Not Acceptable)			
C/O LANE HAYDEN COMPANY 1320 33RD STREET WEST									
PLAMETTO FL 34221						City	FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office						ed office or registe	red agent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if	applicable (NOTE	E: Registere	d Agent signature require	d when reinstating) DATE		
9. Capital Contributions as Shown on record. \$10,000.00 10. Amount of Capital Contributions in FLORIDA to date					ate.	SEE REVERSE SIDE FOR FEE INFORMATION			
	A (ENERAL PARTNER T	HAT I	S A BUSINESS EN	TITY M	UST BE REGIS	TERED AND ACTIVE WITH THIS OFFICE. nt must be filed to change a general partner.	(
12.	NOTE:				13.	i, an amendine	ADDRESS CHANGES ONLY		
12. GENERAL PARTNER INFORMATION DOCUMENT# P98000032967								66	
NAME	LANE HAYDEN COMPANY				SIR	EET ADDRESS			
STREET ADDRESS CITY - ST - ZIP		O STREET WEST O FL 34221			СПУ	-ST-ZIP	0000003266750	120- 120- 120- 120- 120- 120- 120- 120-	
DOCUMENT# NAME					STRE	EET ADDRESS	-05/25/0001063 ****158.75 ****1	58.75	
STREET ADDRESS CITY-ST-ZIP					CITY	-ST-21P			
DOCUMENT # _. , NAME	:	٠			STRI	EET ADDRESS	→ ~		
STREET ADDRESS CITY - ST - ZIP		_			СПУ	-ST-ZIP			
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NAME					STR	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		_			СПУ	-ST-ZIP			
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STREET ADDRESS CITY - ST - ZIP				\sim		- ST-ZIP		<u>,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>	
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 fly signature shall have the same legal effect as if made under eath; that I am a General Partner of the limited partnership or the received or trustee empowered to execute this report as required by Chapter 620, Florida Statutes									
SIGNATURE: 4-21-00 941-721-0600 Date Dayling Phone #									
Buttery R. J. 1927, C. J. T.									