

2002 UNIFORM BUSINESS REPORT (UBR)

002112 SP

DOCUMENT # **A98000002381**

1. Entity Name

LOT 15 MAC FARLANE PARK LTD.

FILED

02 JAN 14 AM 10:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

**C/O VAN HILLO
2501 ESPERANZA STREET
TAMPA FL 33629**

Mailing Address

**C/O VAN HILLO
2501 ESPERANZA STREET
TAMPA FL 33629**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-3536308

Applied For

Not Applicable

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

**VAN HILLO, HARRIS
2501 ESPERANZA STREET
TAMPA FL 33629**

Name

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

City

FL

Zip Code

8. The above named entity subscribes this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

HARRIS W. VANHILLO **1/11/02**
DATE

9. Capital Contributions
as Shown on record.

\$160,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$160,000

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P97000043119**
NAME **VAN HILLO, INC.**
STREET ADDRESS **2501 ESPERANZA STREET**
CITY-ST-ZIP **TAMPA FL 33629**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Harris W. VanHillo **HARRIS W. VANHILLO** **1/11/02**
Date

813 873-4000 Daytime Phone #

CR2E003 (9/01)