

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000000421**

1. Entity Name

THOBURN REAL ESTATE LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 17 AM 11:43

Principal Place of Business

901 N.W. 57TH STREET
GAINESVILLE FL 32605

Mailing Address

901 N.W. 57TH STREET
GAINESVILLE FL 32605-6416

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3564606

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BOVAY, JOHN C
633 N.W. 8TH AVENUE
GAINESVILLE FL 32601

7. Name and Address of New Registered Agent

Name

John C. Bovay

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

901 N.W. 57th Street

City

Gainesville,

FL

Zip Code

32605

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.

\$478,028.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$478,028

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 #
NAME
STREET ADDRESS
CITY - ST - ZIP

THOBURN, ROBERT TRUSTEE
633 N.W. 8TH AVENUE
GAINESVILLE FL 32601

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

THOBURN, CAROLYN S TRUSTEE
633 N.W. 8TH AVENUE
GAINESVILLE FL 32601

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

901 N.W. 57th Street

CITY - ST - ZIP

Gainesville, Florida 32605

STREET ADDRESS

901 N.W. 57th Street

CITY - ST - ZIP

Gainesville, Florida 32605

STREET ADDRESS

700003237047--3

CITY - ST - ZIP

-05/03/00--01073--012

****526.25 ****526.25

STREET ADDRESS

CITY - ST - ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/14/00

352-335-1428

Date

Daytime Phone #

CR2E003 (9/99)