## **2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A9900001153  1. Entity Name  THE JFL FAMILY LIMITED PARTNERSHIP							FILED SECRETARY OF	STATE		
						SECRETARY OF STATE DIVISION OF CORPORATIONS				
Principal Place of Business Mailing Address				5		0	OMAY -3 Ph	4 1:33	<b>3</b>	
7300 4TH ST. VERO BEACH FL 32968			P.O. BOX 6280 VERO BEACH FL 32961-6280			,				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			:	DO NOT WRITE IN THIS SPACE			
City & State	e 			City & State		4. FEI Number 59 - 35	597497		Applied For Not Applicable	
Zip		Country	Zip	Cour	ntry	5. Certificate of		□ Fe	3.75 Additional e Required	
		nd Address of Currer	nt Registered Agent		Name		Address of New Reg		ent	
LINDSEY, JEAN F 500 11TH AVE. VERO BEACH FL 32962				المناسبين المهرية المناسبية المناسبية		s (P.O. Box Number				
			<b>、</b>		·					
		_			City	<u> </u>		FL	Zip Code	
8. The above	named entity s	submits this statement	for the purpose of cha	anging its register	red office or regist	tered agent, or both,	in the State of Florid	la.	į	
C/CALATUDE	Signature, typed or intributions on record.	printed name of registered age \$2,358,962.00	nt and bile if applicable  10. Amoun in FLOI	(NOTE: Registerent of Capital Contribution of Capital Contribution of the RIDA to date.	ad Agent signature requisitutions	red when reinstating)	11. MAKE CHECK SEE REVERSE	DATE PAYABLE TO SIDE FOR I	FEE INFORMATION	
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9. Capital Co as Shown of 12. DOCUMENT / NAME STREET ADDRESS	Signature, typed or intributions on record.  A GE NOTE: ( P990000600 JFLGP, INC 7300 4TH S	\$2,358,962.00  SNERAL PARTNER GENERAL PARTN GENERAL PARTN GENERAL PARTN 164	nt and little if applicable  10. Amoun in FLOR THAT IS A BUSIN MAY NOT be chang	(NOTE: Registere it of Capital Contri RIDA to date.  IESS ENTITY M Jed on the form 13.  STR	ed Agent signature requiributions 1,152 RUST BE REGINA; an amendment	red when reinstating)	11. MAKE CHECK SEE REVERSE CTIVE WITH THIS to change a gene	DATE PAYABLE TO SIDE FOR I OFFICE. eral partn	FEE INFORMATION	
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