1150,00/

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

By: Bernard E. Smith, Vice President

DOOUMENT # A9900001242 1. Entity Name					FILED	
VESTCOR FUND XX, LTD.						
					01 JAN 22 PM 2: 30	
Principal Place of Business Mailing Address 3020 HARTLEY ROAD. SUITE 300 3020 HARTLEY ROAD. JACKSONVILLE FL 32257 JACKSONVILLE FL 322					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal P	Place of Business	3. Mailing Address	3. Mailing Address		T THE CONTROL OF THE SHALL BEAUTH BRAIN BRAIN BRAIN BRAIN AND HEALER STON LEADS	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number Applied For Not Applied For Not Applied For	
Zip	Country	Žip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent	<u> </u>	41	7. Name and Address of New Registered Agent	
VESTCOR PARTNERS XX, INC.				Name		
3020 HARTLEY ROAD, SUITE 300				Street Address	s (P.O. Box Number is Not Acceptable)	
JACKSON'	VILLE FL 32257			City	Zip Code	
				City	FL '	
8. The above	named entity submits this statement	for the purpose of changing	j its registere	ed office or regist	tered agent, or both, in the State of Florida.	
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable. (I	NOTE: Registere	d Agent signature requi	red when reinstating) DATE	
9. Capital Contributions as Shown on record. \$99.90 in FLORIDA to date.				butions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	
as crievin	A GENERAL PARTNER	THAT IS A BUSINESS	ENTITY M	UST BE REGI	STERED AND ACTIVE WITH THIS OFFICE.	
12.		ER INFORMATION	n the form	; an amenome	ent must be filed to change a general partner. ADDRESS CHANGES ONLY	
DOCUMENT # NAME	P99000067061 VESTCOR PARTNERS XX, INC.		STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	3020 HARTLEY ROAD, SUITE 3 JACKSONVILLE FL 32257	00	CITY	-ST-ZIP		
DOCUMENT #			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	BK	
DOCUMENT #			STRE	ET ADDRESS	8000036540484 -02/06/0101067007	
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	***2785.00 ****150.00	
DOCUMENT #			STRE	ET ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT #			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT #			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
indicated	on this report is true and accurate ar	nd that my signature shall ha	ive the same	e legal effect as it	Section 119.07(3)(i), Fiorida Statutes. I further certify that the information f 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 Vesicor Fundax, Ltd., a Florida limited paratership January 18, 2001 (904) 260-3030						