

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B97000000025

1. Entity Name

J.J. TAYLOR COMPANIES, L.P.

Principal Place of Business

11780 U.S. HIGHWAY #1, SUITE 204
NORTH PALM BEACH FL 33408

Mailing Address

11780 U.S. HIGHWAY #1, SUITE 204
NORTH PALM BEACH FL 33408

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

FILED

02 APR 22 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DUE BY: MAY 1, 2002

4. FEI Number

65-0718804

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

Name

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

City

FL

Zip Code

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.

DATE

9. Capital Contributions
as Shown on record.

\$990.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # F97000000231
NAME H. DESPLAINES & CO., INC.
STREET ADDRESS 11780 U.S. HIGHWAY #1, SUITE 204
CITY-ST-ZIP NORTH PALM BEACH FL 33408

STREET ADDRESS

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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:

Henri J. DesPlaines
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/3/02 561-775-7777
Date Daytime Phone #

CR2E003 (9/01)

0021038 SP