

2001 UNIFORM BUSINESS REPORT (UBR)

0014571 AF

DOCUMENT # B97000000517

1. Entity Name

EVANS (1997) INVESTMENTS LIMITED PARTNERSHIP

Principal Place of Business

C/O EVANS PROPERTIES, INC.
12833 HIGHWAY 301
DADE CITY FL 33525

Mailing Address

P.O. BOX 2339
DADE CITY FL 33526-2339

FILED

01 MAR 15 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3455348

Applied For

Not Applicable

Zip

Country

Zip

Country

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

EVANS, JAMES E JR.
C/O EVANS PROPERTIES, INC.
12833 HIGHWAY 301 SOUTH
DADE CITY FL 33525

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$10,000,000.00

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 #
NAME EVANS, JAMES E JR.
STREET ADDRESS 12833 HIGHWAY 301 SOUTH
CITY-ST-ZIP DADE CITY FL 33525

STREET ADDRESS

CITY-ST-ZIP

200003809072-7
-03/20/01--01106--023
****526.25 ****526.25

DOCUMENT #
NAME EVANS, JAMES E III
STREET ADDRESS 660 BEACHLAND BLVD., SUITE 301
CITY-ST-ZIP VERO BEACH FL 32963

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)(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

JAMES E. EVANS, JR.

Date

1/22/01

Daytime Phone #

352/567-5661

CR2E003 (11/00)