

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B98000000115

1. Entity Name

ACCOUNTING PRINCIPALS, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 FEB 11 PM 2:03

Principal Place of Business

ONE INDEPENDENT DRIVE
ATTN: GERALD ROBINSON
JACKSONVILLE FL 32202

Mailing Address

ONE INDEPENDENT DRIVE
ATTN: GERALD ROBINSON
JACKSONVILLE FL 32202



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

59-3482202

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

\$785,034.45

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 # P97000104876
NAME MODIS GP, INC.
STREET ADDRESS ONE INDEPENDENT DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32202

STREET ADDRESS

CITY-ST-ZIP

800004925038--6

02/14/02--01031--008

***526.25 ***526.25

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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] **NOT REQUIRED** P of Taxes 2-7-02 904 360-2704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

Officers and Board of Directors		Accounting Principles, LTD	
Title	Name	Social Security #	Address
Chairman of the Board	Derek E. Dewan	041-42-1309	One Independent Drive Jacksonville, FL 32202
Sr. Vice President Treasurer	Robert Crouch	264-69-1176	One Independent Drive Jacksonville, FL 32202
Sr. Vice President Secretary	Marc M. Mayo	267-13-6753	One Independent Drive Jacksonville, FL 32202
Chief Executive Officer	Timothy D. Payne	563-29-9957	One Independent Drive Jacksonville, FL 32202
President	Jeff Jackovich	555-98-0218	One Independent Drive Jacksonville, FL 32202
VP of Taxes	Gerald Robinson	051-62-4431	One Independent Drive Jacksonville, FL 32202