

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000014104

1. Entity Name  
VFA-TIMUQUANA PARTNERS, INC.

**FILED**  
**Apr 28, 2000 8:00 am**  
**Secretary of State**

04-28-2000 90057 018 \*\*\*150.00

Principal Place of Business  
**3020 Hartley Road, Ste. 300**  
**Jacksonville, FL 32257**

Mailing Address  
**3020 Hartley Road, Ste. 300**  
**Jacksonville, FL 32257**

2. Principal Place of Business  
**3020 Hartley Road**  
Suite, Apt. #, etc.  
**Suite 300**  
City & State  
**Jacksonville, FL**  
Zip  
**32257** Country  
**USA**

3. Mailing Address  
**3020 Hartley Road**  
Suite, Apt. #, etc.  
**Suite 300**  
City & State  
**Jacksonville, FL**  
Zip  
**32257** Country  
**USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3164735**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**FARRELL, MARK T.**  
**3020 Hartley Road, Ste. 300**  
**Jacksonville, FL 32257**

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:  
**April 4, 2000**  
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
Signature, typed or printed name of registered agent and title if applicable. DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DP	<input type="checkbox"/> Delete		TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROOD, JOHN D			NAME	John D. Rood		
STREET ADDRESS	3030 HARTLEY ROAD			STREET ADDRESS	3020 Hartley Road, Ste 300		
CITY-ST-ZIP	JACKSONVILLE FL 32257			CITY-ST-ZIP	Jacksonville, FL 32257		
TITLE	VS	<input type="checkbox"/> Delete		TITLE	VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FARRELL, MARK			NAME	Mark T. Farrell		
STREET ADDRESS	3030 HARTLEY ROAD			STREET ADDRESS	3020 Hartley Road, Ste 300		
CITY-ST-ZIP	JACKSONVILLE FL			CITY-ST-ZIP	Jacksonville, FL 32257		
TITLE	VS	<input type="checkbox"/> Delete		TITLE	VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SMITH, BERNARD			NAME	Bernard E. Smith		
STREET ADDRESS	3030 HARTLEY ROAD			STREET ADDRESS	3020 Hartley Road, Ste 300		
CITY-ST-ZIP	JACKSONVILLE FL			CITY-ST-ZIP	Jacksonville, FL 32257		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **APRIL 4, 2000** (904) 260-3030  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #