200 UNIFORM BUSINESS REPORT (UBR

1. Entity Nar		00264		,					
VESTCOR PARTNERS XIV, INC.						FILED			
Principal Place of Business Mailing Address						01 JAN 22 PM 7: 43			
3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257		3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257			ļ	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Sta	te	City & State			4.	FEI Number 59-3479454		plied For Applicable	
Zip Country		Zip Count		try	5.	Certificate of Status Desired \$8.7	Addi	tional	
	6. Name and Address of Current R	 		Mana	7.	Name and Address of New Registered Agent			
FARRELL, MARK T 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257				Name Street Address					
				City FL Zip Code			Code		
Tax filing (See crite	Signature, typed of proted name of registered agent do oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
11,	OFFICERS AND D		12.	1	ΑC	DDITIONS/CHANGES TO OFFICERS AND DIREC	TORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ROOD, JOHN D 3020 HARTLEY ROAD, STE. 300 JACKSONVILLE FL 32257	☐ Delete		1		70000357657 -01/26/0101061 ****158.75 ***	D	□ Addition 124 8.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FARRELL, MARK T 3020 HARTLEY ROAD, STE. 300 JACKSONVILLE FL 32257	Delete				□ Ch	ange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT SMITH, BERNARD E 3020 HARTLEY ROAD, STE. 300 JACKSONVILLE FL 32257	☐ Delete	1			□ Ch.	inge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PACKARD, KRISTEN K 3020 HARTLEY ROAD, STE. 300 JACKSONVILLE FL 32257	☐ Delete				□ Chi	inge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, a vany	☐ Delete				□ Cha	inge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				Cha	nge P	Addition	
indicated	on this report or supplemental report is tr poration or the receiver or trustee empow or on an attachment with an address, wit	ue and accurate and that my	y signate is requir	ire shall have the	same I 7, Florid . Smith		ficer o 11 or E	r director	