

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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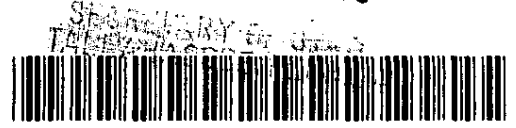
DOCUMENT # **A00000000784**



1. Entity Name
5601 POWERLINE CENTER, LTD.

FILED

03 APR 28 AM 10:56



Principal Place of Business
C/O JAMIE A. DANBURG
7700 CONGRESS AVE., STE. 3100
BOCA RATON FL 33487

Mailing Address
C/O JAMIE A. DANBURG
7700 CONGRESS AVE., STE. 3100
BOCA RATON FL 33487

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State
City & State

4. FEI Number **65-1009056** 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

FELUREN, MARK S
2200 N. COMMERCE PKSY., STE. 202
WESTON FL 33326

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$10,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. 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 # **P00000047428**
NAME **POWERLINE CENTER, INC.**
STREET ADDRESS **7700 CONGRESS AVE., STE. 3100**
CITY-ST-ZIP **BOCA RATON FL 33487**

STREET ADDRESS
CITY-ST-ZIP
STREET ADDRESS **500017118995**
CITY-ST-ZIP **04/28/03--01012--024 **158.75**

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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: *Jamie A Danbury* **Jamie A Danbury** 1-4-03 561-997-5777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)