UNIFORM BUSINESS REPORT (UBR) A0000001011 DOCUMENT #

2003 LIMITED PARTNERSHIP

CTÁ LAND HOLDINGS, LTD.



Principal Place of Business 433 PLAZA REAL

2. Principal Place of Business

SUITE 335

Zip

BOCA RATON FL 33432

225 NE

Suite, Apt. #, etc.

Suit 200 City & State

3*34*32

Mailing Address
433 PLAZA REAL

SUITE 335

BOCA RATON FL 33432

3. Mailing Address 225_NE

City & State

Boca.

37432

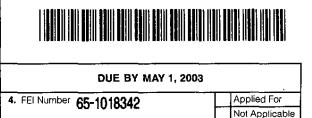
Suite, Apt. #, etc.

Su.k 200

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SECRETARY OF STATE MEETABASSEE FLORIDA



GRAGG, K. LAWRENCE ESQ WHITE & CASE LLP 200 S BISCAYNE BLVD SUITE 4900 **MIAMI FL 33131**

Name	,			
Street Address (P.O.	Box Number is Not Accep	table)		
City			Zip Code	

7. Name and Address of New Registered Agent

5. Certificate of Status Desired

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.

Mizzu Blud.

Country

as Shown on record.

Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions

Country

6. Name and Address of Current Registered Agent

\$1,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

\$8.75 Additional

Fee Required

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	L0000007275 CTA LAND HOLDINGS LLC	STREET ADDRESS	225 NE MIZNE Blud. Suck 200
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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:

