2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

02 APR 19 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000163863 AT

DOCUMENT # A01000000379

1. Entity Name

WINDERMERE SCHOOL PARTNERS, L.L.L.P.

Principal Place of Business
C/O THOMAS R. ALLEN, ESQ.
14 EAST WASHINGTON STREET, SUITE 600
ORLANDO FL 32801

Mailing Address
6189 WINTER GARDEN-VINELAND ROAD
WINDERMERE FL 34786

2. Principal Place of Business: 6189 Winter Garden-Vineland Rd.
Suite, Apt. #, etc.
City & State: Windermere, Fl.
Zip: 34786 Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

DUE BY MAY 1, 2002

4. FEI Number: 59-3726761 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, THOMAS R ESQ.
C/O ALLEN, LANG, ET AL
14 EAST WASHINGTON STREET, SUITE 600
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name: American Campus Properties, Inc.
Street Address (P.O. Box Number is Not Acceptable): 6189 Winter Garden-Vineland Rd.
City: Windermere FL Zip Code: 34786

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: D. Porter Spangler, President — Date: 4/11/02
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: $6,000,000.00

10. Amount of Capital Contributions in FLORIDA to date: $3,360,000

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 #	P99000089390	STREET ADDRESS	
NAME	THE AMERICAN CAMPUS PROPERITES, INC.	CITY-ST-ZIP	000005418140--9 -05/01/02--01073--014
STREET ADDRESS	6189 WINTER GARDEN-VINELAND ROAD		****526.25 ****526.25
CITY-ST-ZIP	WINDERMERE FL 34786		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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: Richard H. Hornbeck, Secretary — Date: 4/11/02 — Daytime Phone #: 407-905-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (9/01)