


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A08240 1. Entity Name IDLEWILD ASSOCIATES, LTD.	
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FILED

2003 SEP -9 AM 10:37

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business % UBS PAINWEBBER INC. 1285 AVENUE OF THE AMERICAS NEW YORK NY 10019	Mailing Address % UBS PAINWEBBER INC. 1285 AVENUE OF THE AMERICAS NEW YORK NY 10019
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

DUE BY SEPTEMBER 24, 2003	
4. FEI Number 13-3020183	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <div style="text-align: center; border: 1px solid black; padding: 2px;"> 800022836228 09/09/03--01015--002 **926.25 </div> City FL Zip Code
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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. \$1,241,848.00	10. Amount of Capital Contributions in FLORIDA to date. \$339,816.00	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FE INFORMATION
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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 # 845202 NAME PW IDLEWILD CORP STREET ADDRESS 1285 AVE OF THE AMERICAS CITY-ST-ZIP NEW YORK NY 10019	STREET ADDRESS CITY-ST-ZIP
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP
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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

PW Idlewild Corp, General Partner by Stephen R. Dya, President

SIGNATURE: SIGNATURE REQUIRED 212 713 3213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CP2E003 (4/03)

SAMPLE CHECK HERE