2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# A18051

1. Entity Name

ORLANDO-LAKE CONWAY LIMITED PARTNERSHIP

Principal Place of Business				Mailing Address				DO APR 21	Alf 3: 05				
1873 SOUTH BELLAIRE STREET. SUITE 1700 DENVER CO 80222-4348				1873 SOUTH BELLAIRE STREET. SUITE 1700 DENVER CO 80222-4360									
											f il 11311	81811 81811 81811 1881 81811 81811 81811 1881	
2. Principal Place of Business 2000 South Colorado Blvd. 3. Mailing Address 2000 South					Colorado Blvd.)				BIBIR PIRAL BRAKI IBBI	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
Tower Two, Suite 2-1000 City & State				Tower Two, Suite 2-				4. FEI Number			Т	Applied For	
Denver, CO				Denver, CO					06-111798	2		Not Applicable	
				Zip 222	ntry	5. Certificate of Status Desired Fee R			ee Re	Additional quired			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name							
CORPORATION SERVICE COMPANY						Street Address (P.O. Box Number is Not Acceptable)							
1201 HAY STREET TALLAHASSEE FL 32301-2525						<u></u>		· · · · · · ·					
						City				FL	Zip	Code	
8. The above nam	ned entity	submits this statement for	the p	urpose of changing its	register	ed office or	r registere	ed agent, or both,	in the State of F	orida.			
SIGNATURE													
9. Capital Contributions as Shown on record. \$3,000,000.00 10. Amount of Capital Cin FLORIDA to date									11. MAKE CHE SEE REVER			PT. OF STATE NFORMATION	
	A (SENERAL PARTNER TO General Partners MA	HAT I	S A BUSINESS EN	TITY M	UST BE	REGIST	ERED AND AC	TIVE WITH TH	IIS OFFICE.	ner		
12.	11012	GENERAL PARTNER			, , , , , , , , , , , , , , , , , , , ,		-	ADDRESS CH					
	P08221 NHP-HDV NINE, INC.					EET ADDRESS	Tower	South Col r Two, Su	ite 2-100				
	S 1225 EYE STREET, N.W., SUITE 200 WASHINGTON DC 20005				CITY	- ST- ZIP	Denve	er, CO 80	0222				
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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

Orlando-Lake Conway Limited Partnership, by its GP, NHP-HDV Nine, Inc.

SIGNATURE: By: COGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Green, Asst. Sec.

SLOPETARY OF STATE IVISION OF CORPORATIONS

(303) 757-8101

Daytime Phone #