2000	UNIFORM BUS	INESS RE	PORT				
DOCUI	MENT # A2865	55			FIL!	ED W	(4/20
AJA PROPERTIES NO. 6, LTD.					00 APR 12	bH 3:00	, 00
•	AWERENCE COMMERCIAL REAL ESTATI OWER BLVD., SUITE C-1	Mailing Address E C/O PETER LAWER 4710 EISENHOWER TAMPA FL 33634-6	RENCE COMM BLVD SUITI	ERCIAL REAL ES'	TALLEAHAS	SEE FLORIDA	(4)) 6:8)) 8:8)) 8:8)) 8:6)) 8:6)) 8:6)
Principal Place of Business     3. Mailing Address				•			
Suite, Apt. #, etc.  Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State		4. FEI Number	FEI Number 65-0132098 Applied For Not Applied	
Zip	Country	Country Zip		untry	5. Certificate of Status Desired Fee Required		<u> </u>
	6. Name and Address of Current	Registered Agent		Name	7Name.and.A	ddress of New Register	red Agent
PETER LAWRENCE COMMERCIAL REAL ESTATE, INC 4710 EISENHOWER BLVD. SUITE C-1 TAMPA FL 33634-6334				Street Address (P.O. Box Number is Not Acceptable)  City  Lip Code			
8. The above named entity submits this statement for the purpose of changing its reg  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re  9. Capital Contributions as Shown on record.  \$2,106,049.00  10. Amount of Capital C in FLORIDA to date.  A GENERAL PARTNER THAT IS A BUSINESS ENTITED.						11. MAKE CHECK PAYA SEE REVERSE SID	ABLE TO DEPT. OF STATE E FOR FEE INFORMATION FICE.
	NOTE: General Partners M.	AY NOT be changed	on the for	m; an amendn	nent must be filed	to change a general ADDRESS CHANGES	partner.
12. GENERAL PARTNER INFORMATION DOCUMENT / K94115 THE RED & GREY 75TH CORPORATION			13	TREET ADDRESS		ADDRESS CHANGES	ONLI
STREET ADDRESS CITY-ST-ZIP	ORESS 4710 EISENHOWER BLVD., SUITE C-1		CI	TY-ST-ZIP			
DOCUMENT# NAME			នា	TREET ADDRESS			
STREET ADDRESS CITY - ST - ZIP				TY-ST-ZIP	9000032232291		
DOCUMENT#			ទា	TREET ADDRESS	<u> </u>	****526.25	****526.25
STREET ADDRESS City-St-Zip			. a	TY-ST-ZIP			· .
DOCUMENT# NAME STREET ADDRESS			_	TREET ADORESS			
CITY-ST-ZIP DOCUMENT#	<u> </u>			TY-ST-ZIP	<del> </del>		
NAME STREET ADDRESS				TY-ST-ZIP			
CITY-ST-ZIP DOCUMENT #				TREET ADDRESS			<u> </u>
NAME							

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

The Red & Crey 75th Corporation, GP

SIGNATURE:

4-5-00
813-889-8855

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPEN OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #