

2001 UNIFORM BUSINESS REPORT (UBR)

0020003 AB

DOCUMENT # A31936
 1. Entity Name
BRADENTON-SIMPSON LIMITED PARTNERSHIP

FILED

01 MAR -5 AM 10:59

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
 2121 EISENHOWER AVE., STE. 300
 ALEXANDRIA VA 22314

Mailing Address
 P.O. BOX 430
 ALEXANDRIA VA 22313

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

4. FEI Number **54-1607393**

Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
GREENE, ROBERT F.
1301 SIXTH AVENUE WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$2,187,500.00**

10. Amount of Capital Contributions in FLORIDA to date. **2,165,625**

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	S90509 BRADENTON-SIMPSON, INC. 2121 EISENHOWER AVE., STE. 300 ALEXANDRIA VA 22314
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY-ST-ZIP	000003819620--0 -03/08/01--01116--013 ***526.25 ***526.25
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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: Lawrence E. Kahan **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER**

Date 02/28/01 Daytime Phone # 703-299-0029

CR2E003 (11/00)