

2001 UNIFORM BUSINESS REPORT (UBR)

0002220 AF

DOCUMENT # **A32882**

1. Entity Name

DOWNTOWN TAMPA PROPERTIES, LTD.

FILED
01 FEB -9 AM 11:32

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 200 BOULDER RIDGE ROAD SCARSDALE NY 10583	Mailing Address C/O UNGER WEBSTER SWARTWOOD 701 PEACHTREE RD. ORLANDO FL 32804
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2. Principal Place of Business	3. Mailing Address c/o Webster & Partners, P.L.
Suite, Apt. #, etc.	Suite, Apt. #, etc. 1936 Lee Road, Ste 101
City & State	City & State Winter Park, FL 32789
Zip Country	Zip Country

4. FEI Number 59-3142266	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~UWSA SERVICES, INC.~~
**701 PEACHTREE ROAD
ORLANDO FL 32804**

Name W & P Services, Inc.
Street Address (P.O. Box Number is Not Acceptable) 1936 Lee Road, Ste 101
City Winter Park
State FL
Zip Code 32789

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 **President** **24 Jan 2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. \$1,944,137.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE 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 # NAME STREET ADDRESS CITY-ST-ZIP	P93000031040 SCIDC TAMPA PROPERTIES, INC. 200 BOULDER RIDGE ROAD SCARSDALE NY 10583	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	988883718889-4
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	-02/19/01--01124--008
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	****525.25 ****525.25
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		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: **Homi Gazdar** 27 Jan 2001 914-478-2727
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)