

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A93000001343**

1. Entity Name
RELATED/GMN BISCAYNE, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 26 PM 2: 23



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O INSIGNIA FINANCIAL GROUP, INC.
P.O. BOX 1089
GREENVILLE SC 29602

Mailing Address
C/O INSIGNIA FINANCIAL GROUP, INC.
P.O. BOX 1089
GREENVILLE SC 29602-1089

2. Principal Place of Business
2000 South Colorado Blvd.

3. Mailing Address
2000 South Colorado Blvd.

Suite, Apt. #, etc.
Tower Two, Suite 2-1000

Suite, Apt. #, etc.
Tower Two, Suite 2-1000

City & State
Denver, CO

City & State
Denver, CO

4. FEI Number **65-0454743**

Applied For
 Not Applicable

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

Zip Country Zip Country
80222 USA 80222 USA

6. Name and Address of Current Registered Agent

SF GENERAL, INC.
C/O INSIGNIA FINANCIAL GROUP, INC.
2300 GLADES ROAD, SUITE 310 WEST
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City Tallahassee **FL** Zip Code **32301**

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 *Deborah D. Skipper* **Deborah D. Skipper** **4/27/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent required when reinstating) DATE

9. Capital Contributions as Shown on record. **\$695.00**

10. Amount of Capital Contributions in FLORIDA to date.

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 | | 13. ADDRESS CHANGES ONLY | |
|---|--|-----------------------------------|---|
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | P93000082828 RELATED HOMESTEAD, INC. 2828 CORAL WAY, PENTHOUSE SUITE MIAMI FL 33145 | STREET ADDRESS CITY - ST - ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | F97000001937 SF GENERAL, INC. P.O. BOX 1089 GREENVILLE SC 29602 | STREET ADDRESS CITY - ST - ZIP | 2000 South Colorado Boulevard Tower Two, Suite 2-1000 Denver, CO 80222 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | 000003237870--5 -05/03/00--01112-010 ****141.25 ****141.25 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | <i>B/S</i> |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | <i>4/26</i> |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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
Related/GMN Biscayne, Ltd., by its Managing GP, SF General, Inc.

SIGNATURE: By: *E. Green* **REQUIRED** E. Green, Asst. Sec. 4-24-00 (303) 757-8101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)