

2002 UNIFORM BUSINESS REPORT (UBR)

0004508 AV

DOCUMENT # A94000000379
 1. Entity Name
CHURCH STREET MARKET LIMITED PARTNERSHIP

Principal Place of Business Mailing Address
C/O EURO AMERICAN MANAGEMENT, INC. **C/O EURO AMERICAN MANAGEMENT, INC.**
4350 WEST CYPRESS STREET, SUITE 250 **4350 WEST CYPRESS STREET, SUITE 250**
TAMPA FL 33607 **TAMPA FL 33607**

FILED
02 APR 19 PM 4:21
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2. Principal Place of Business 3. Mailing Address
4300 W. Cypress Street **4300 W. Cypress Street**
Suite 1075 **Suite 1075**
Tampa, FL 33607 **Tampa, FL 33607**

DUE BY MAY 1, 2002
 4. FEI Number **65-0475623** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
AMEURCO MANAGEMENT, INC.
4350 W. CYPRESS, STE. 250
TAMPA FL 33607

7. Name and Address of New Registered Agent
 Name
 Street **4300 W. Cypress Street, Suite 1075**
 Tampa, FL 33607
 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  **BRUCE D. BURDGE** **EXECUTIVE VICE PRESIDENT** **APR 4 2002**
Signature, typed or printed name of registered agent and title if applicable. DATE

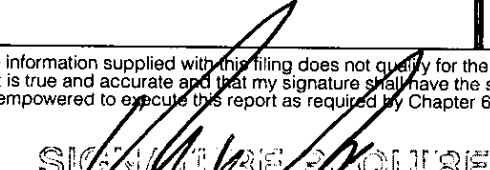
9. Capital Contributions as Shown on record. **\$4,350,100.00** 10. Amount of Capital Contributions in FLORIDA to date. 11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

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 #	P93000083428	STREET ADDRESS	4300 W. Cypress Street
NAME	EURO VI, INC.		Suite 1075
STREET ADDRESS	4350 W. CYPRESS, STE. 250	CITY-ST-ZIP	Tampa, FL 33607
CITY-ST-ZIP	TAMPA FL 33067		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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:  **SIGNATURE REQUIRED**
BRUCE D. BURDGE **EXECUTIVE VICE PRESIDENT** **APR 4 2002** **813-353-8800**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)