200	Z UNI	LAUM DÁS	INESS REPU	'NI ((UDR)	grant grants and a second seco	
DOCUMENT # A9600000735 1. Entity Name						FILED	
MOUNT WASHINGTON PARTNERS, LTD.					02 MAY -3 PM 3: 03		
Principal Place of Business C/O RICHARD TYSON AND EILEEN TYSON. TBE 6801 E. CYPRESS HEAD DR. PARKLAND FL 33067			Mailing Address C/O RICHARD TYSON AND EILEEN TYSON. TBE 6801 E. CYPRESS HEAD DR. PARKLAND FL 33067		N TYSON. TBE	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002	
City & State			City & State			4. FEI Number 65-0661333 Applied For Not Applicable	
Zip	Zip Country		Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name	and Address of Current	Registered Agent			7. Name and Address of New Registered Agent	
•• • • • •					Name		
M & W AGENTS, INC. 9100 SOUTH DADELAND BLVD.			Street Address		Street Address	(P.O. Box Number is Not Acceptable)	
ONE DAT	TRAN CENT	ER, SUITE 1707					
MIAMI FL 33156					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	Size to the state of						
Signature, typed or printed name of registered agent and title if applicable. DATE							
9. Capital Contributions as Shown on record. \$607,391.00 In FLORIDA to date					utions	ions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	
	A C NOTE:	ENERAL PARTNER T General Partners MA	HAT IS A BUSINESS EN' Y NOT be changed on th	TITY ML ne form;	JST BE REGIS an amendme	TERED AND ACTIVE WITH THIS OFFICE. nt must be filed to change a general partner.	
12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY							
DOCUMENT # NAME	GROVE-STREET INC.			STREET	T ADDRESS		
STREET ADDRESS CITY-ST-ZIP	A411 FR41101000 G4 A441F		Willer the	CITY-S	ST-ZIP		
DOCUMENT # RICHARD TYSON & EILEEN TYSON TENANTS BY EN				STREET	T ADDRESS	4000055776948	
STREET ADDRESS TIRELY, 6801 E. CYPRESS HEAD PARKLAND FL 33067			DR.	CITY-S	ST-ZIP	-05/21/0201069027 ****526.25 ****526.25	
DOCUMENT # NAME	SQUIRREL HILL CORPORATION			STREET	r address	ي سرم د را محمد د د د د د د د د د د د د د د د د د	
STREET ADDRESS CITY-ST-ZIP				CITY-S	ST-ZIP		
DOCUMENT # NAME				STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-ZIP		
DOCUMENT # NAME				STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-ZIP		
DOCUMENT / NAME			-	STREET	ADDRESS		
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER