

2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A96000001063

1. Entity Name
LEOLINE INVESTMENTS, LTD.

FILED
01 APR 12 AM 10:22



Principal Place of Business Mailing Address
7900 GLADES ROAD, SUITE 510 320 BOCA RATON FL 33434 - 4104
7900 GLADES ROAD, SUITE 510 320 BOCA RATON FL 33434 - 4104

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. SUITE 320 Suite, Apt. #, etc. SUITE 320
City & State City & State

4. FEI Number **59-2495511** Applied For Not Applicable

Zip Country Zip Country
33434-4104 33434-4104

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

6. Name and Address of Current Registered Agent
H. JACOBSON AND COMPANY
7900 GLADES ROAD, SUITE 510
BOCA RATON FL 33434

7. Name and Address of New Registered Agent
Name **H. JACOBSON AND COMPANY**
Street Address (P.O. Box Number is Not Acceptable) **7900 GLADES ROAD, SUITE 320**
City **BOCA RATON** FL Zip Code **33434-4104**

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  **Harold B. Jacobson** 4-10-01
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. **\$7,000,000.00**

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	
DOCUMENT #	
NAME	H. JACOBSON AND COMPANY
STREET ADDRESS	7900 GLADES ROAD, SUITE 510
CITY-ST-ZIP	BOCA RATON FL 33434
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	7900 GLADES ROAD, SUITE 320
CITY-ST-ZIP	BOCA RATON FL 33434-4104
STREET ADDRESS	
CITY-ST-ZIP	600004033516--2
	-04/19/01--01100--009
	***526.25 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
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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 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:  **Harold B. Jacobson** 4-10-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)