

2002 UNIFORM BUSINESS REPORT (UBR)

0017267 AT

DOCUMENT # B00000000337
 1. Entity Name
JEFFERSON AT DOUGLAS ENTRANCE, L.P.
REC'D JAN 07 2002

FILED

02 APR 30 PM 4: 21

SECRETARY OF STATE
 TALLAHASSEE FLORIDA



Principal Place of Business
**600 EAST LAS COLINAS BLVD., SUITE 1800
 IRVING TX 75039**

Mailing Address
**P.O. BOX 619091
 DALLAS TX 75261-9091**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

75-2904373

APPLIED FOR

Applied For
 Not Applicable

City & State

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$8,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$1,268,187**

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 STREET ADDRESS CITY-ST-ZIP	M99000000338 JPI GENPAR REALTY LLC 600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING TX 75039
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	000005505270--8 -05/13/02--01015--003 ****526.25 ****526.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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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 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: **Joe Ratliff**
Joe Ratliff
Vice President Taxation
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/26/02 972-556-3821
Date Daytime Phone #

CR2E003 (9/01)