

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **B94000000297**

1. Entity Name  
**WORLD OMNI LEASE SECURITIZATION L.P., LIMITED PA**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 AUG -4 PM 1:25

Principal Place of Business  
C/O THE CORPORATION TRUST COMPANY  
1209 ORANGE STREET  
WILMINGTON DE 19801

Mailing Address  
6150 OMNI PARK DRIVE  
ATTN: LEGAL DEPT.  
MOBILE AL 36609



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip

3. Mailing Address  
111 NW 12TH AVENUE  
JMFDF018  
DEERFIELD BEACH FL  
City & State  
Zip  
Country

4. FEI Number **63-1120743**  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **\$44,536,270.56**  
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 #	M98000001144	STREET ADDRESS	
NAME	WORLD OMNI LEASE SECURITIZATION LLC	CITY-ST-ZIP	
STREET ADDRESS	6150 OMNI PARK DRIVE		
CITY-ST-ZIP	MOBILE AL 36609		
DOCUMENT #		STREET ADDRESS	400003351064--1
NAME		CITY-ST-ZIP	-08/03/00--01076--014
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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.

WORLD OMNI LEASE SECURITIZATION L.P. its general partner  
BY: WORLD OMNI LEASE SECURITIZATION LLC, 08/01/2000 954-420-4617  
SIGNATURE: **JOHN J. WHELAN, SECRETARY**  
Date Daytime Phone #

CR2E003 (5/00)