

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B97000000623

1. Entity Name
BATTIN I LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -7 AM 9:48

Principal Place of Business % THE NEWKIRK GROUP 100 JERICHO QUADRANGLE. STE. 214 JERICHO NY 11753	Mailing Address % THE NEWKIRK GROUP 100 JERICHO QUADRANGLE. STE. 214 JERICHO NY 11753-2702
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 22-3096319		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		Not Applicable
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record.	\$17,750.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 # F9700006107	NAME BATTIN CORP.	STREET ADDRESS	100002126311--1
STREET ADDRESS % THE NEWKIRK GROUP, 100 JERICHO QUAD.#214	CITY - ST - ZIP JERICHO NY 11753	CITY - ST - ZIP	-02/15/00--01103--026
			****213.00 ****213.00
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY - ST - ZIP	CITY - ST - ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY - ST - ZIP	CITY - ST - ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY - ST - ZIP	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: *By: Battin Corp, General Partner* **1/17/2000** **516 822**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER *Asst Secy* Date Daytime Phone # *0022*

CRZE003 (9/99)