

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B99000000265

1. Entity Name

SRK VIERA ASSOCIATES L.P.

Principal Place of Business

1209 ORANGE ST
WILMINGTON DE 19801

Mailing Address

1209 ORANGE ST
WILMINGTON DE 19801-1120

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

4053 Maple Road

Suite, Apt. #, etc.

4053 Maple Road

City & State

Amherst, NY

City & State

Amherst, NY 14226

Zip

Country

14226

Zip

Country

14226

4. FEI Number

38-3366031

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

CT 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

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.

\$0.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$1,675,000

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 # F99000003473
NAME BENCHMARK VIERA PROPERTIES, INC.
STREET ADDRESS 4053 MAPLE ROAD
CITY - ST - ZIP AMHERST NY 14226

STREET ADDRESS

100003280931--0

CITY - ST - ZIP

06/09/00 01019-015
***526.25 ***526.25

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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:

Signature of P. Jeffrey Birch
P. Jeffrey Birch
Vice-President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/25/00

Date

(716) 833-4986

Daytime Phone #

CR2E003 (9/99)