

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 28 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000003349

1. Entity Name
SUNSET AVENUE PARTNERS, L.L.C.

Principal Place of Business
324 ROYAL PALM WAY, SUITE #204
PALM BEACH FL 33480

Mailing Address
324 ROYAL PALM WAY, SUITE #204
PALM BEACH FL 33480-4306



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0925365

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CURY, EDWARD C
324 ROYAL PALM WAY, SUITE #204
PALM BEACH FL 33480

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE Delete
NAME MGR
CURY, EDWARD C
STREET ADDRESS 324 ROYAL PALM WAY, SUITE #204
CITY - ST - ZIP PALM BEACH FL 33480

Change Addition
900003251109--0
-05/12/00--01097--022
*****55.00 *****55.00

TITLE Delete
NAME MGR
BECK, LOUIS S
STREET ADDRESS 5269 PRINCETON WAY
CITY - ST - ZIP BOCA RATON FL 33496

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Delete
NAME member/manager
Cury, Stephen E.
STREET ADDRESS 324 Royal Palm Way #204
CITY - ST - ZIP Palm Beach, FL 33480

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Delete
NAME member
JIFF GRACE
STREET ADDRESS 324 Royal Palm Way, #204
CITY - ST - ZIP Palm Beach FL 33480

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Stephen E. Cury (Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER
Date 4/25/00 (561) 852-1600
Daytime Phone #

CR2E083 (9/99)