

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 25, 2002 8:00 am**  
**Secretary of State**

08-25-2002 90216 002 \*\*\*550.00

0082744 AV

**DOCUMENT # P99000080983**

1. Entity Name  
**METROCENTRE CORPORATE PARTNERS GP, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5488 PENNOCK POINT ROAD JUPITER FL 33458		Mailing Address 5488 PENNOCK POINT ROAD JUPITER FL 33458	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number <b>65-0950867</b>			Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  CHERRY, RICHARD G 1665 PALM BEACH LAKES BLVD. SUITE 600 WEST PALM BEACH FL 33401		7. Name and Address of New Registered Agent Name <b>Thomas A. Getz</b> Street Address (P.O. Box Number if Not Applicable) <b>5488 Pennock Pointe Road</b> City <b>Jupiter FL 33458</b> FL <b>33458</b>	
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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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE *Thomas A. Getz PD* **Thomas A. Getz PD** DATE **8/22/02**

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD GETZ, THOMAS 5488 PENNOCK POINTE RD. JUPITER FL 33458</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD CLIFTON, BRAD 5506 PENNOCK POINTE RD. JUPITER FL 33458</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VPD GETZ, DIANE P. 5488 Pennock Pointe Road Jupiter FL 33458</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD WEBB, RANDY 31 RIVER DR. JUPITER FL 33469</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SD GETZ, DIANE P. 5488 Pennock Pointe Rd Jupiter, FL 33458</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas A. Getz* **Thomas A. Getz** 8/22/02 561-747-1118

CR2E034 (4/02)