

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 APR 16 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # A31041

1. Entity Name
FLORIDA WAREHOUSE MANAGEMENT, LTD.

Principal Place of Business 3850 HOLLYWOOD BLVD., STE. 400 HOLLYWOOD FL 33021	Mailing Address 3850 HOLLYWOOD BLVD., STE. 400 HOLLYWOOD FL 33021
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0233566	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**CORNFELD, ROBERT M.
3850 HOLLYWOOD BLVD. #400
HOLLYWOOD FL 33021**

7. Name and Address of New Registered Agent

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. \$1,700,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,700,000.00	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 # NAME STREET ADDRESS CITY-ST-ZIP	S21712 CAMBRIDGE ASSET MGMT, INC 3850 HOLLYWOOD BL, #400 HOLLYWOOD FL	STREET ADDRESS CITY-ST-ZIP	
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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: _____
Robert M. Cornfeld, President
Cambridge Asset Mgmt, Inc.

Date **4/12/01** Daytime Phone # **(954) 989-2200**

CR2E003 (11/00)