2003 LIMITED PARTNERSHIP

UN	IIFOR	M BUSINES	SS REPOR	T ((UBR)		•	
DOCUMENT # A30927 1. Entity Name LOCKWOOD ASSOCIATES LIMITED PARTNERSHIP						03 APR 16 PM 4:01		
Principal Place of Business 4182 LIVE OAK BLVD. DELRAY BEACH FL 33445			Mailing Address 4182 LIVE OAK BLVD. DELRAY BEACH FL 33445			SEEREJARY OF STAIL TABEAHASSEE, FEORTBA		
2. Principal Place of Business			3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2003		
City & Stat	te		City & State			02702327 13	pplied For	
Zip	Zip ¹ Sec. Country		Zip Coun		ntry	5. Certificate of Status Desired	ditional	
	6 Name	and Address of Current Re	nistered Agent	-	[- 120 t	
ing	o. Name		gistered Agent		Name	7. Name and Address of New Hegistered Agent	6.5 kg 2 c d	
FELNER, JAY A30927 4182.LIVE OAK BLVD. PROPERTY OF THE PARTY OF THE PA					Street Address (P.O. Box Number is Not Acceptable)			
VELHAY BEACH FL 33445								
(35).					City FL Zip Code		ie	
6.67 He above in a media entity submits this statement for the purpose of changing its received obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. \$478,641.00 10. Amount of Capital in FLORIDA to date.					<u> </u>	ं १ विकासि क्षेत्र सीमा क्षार न्यांन गर्म दिश स्था ग्राम बेद्धा श्राम श्राम स्टिमानी स्टेस राम उत्पाद स्थान साम स्थानमा होती स्थान सामा	TOP STATE	
45.7						GISTERED AND ACTIVE WITH THIS OFFICE. ment must be filed to change a general partner.		
12.	- 101	GENERAL PARTNER IN	<u> </u>	13.	<u> </u>	«ADDRESS CHANGES ONLY		
DOCUMENT / F0000000355 NAME STREET ADDRESS CITY-ST-ZIP HIGHLAND PARK IL 60035			TOTIMATION		EET ADDRESS)63; J.,	
			Cı		r-ST-ZIP			
DOCUMENT / NAME LIVER,	'AY			STRI	EET ADDRESS			
	RBONESSE OAK BLVD. LEPRY DEACH FL 33445				TY-ST-ZIP			
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STREET ADDRESS CITY-ST-ZIP		\$478,641.00		CITY	/-ST-ZIP	·	·	
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DOCUMENT # "	600 CENTRAL AVE., SUITE 355					•		

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 eath; 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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP...

HIGHLAND PARK IL 60035

MINIO Robert U. Goldman, V.P.

3/25/03

Date

(847) 432-3666

Daytime Phone #

CR2E003 (10/02)