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BAY COLONY LIMITED PARTNERSHIP							FILE	D				Ą
Principal Plac	ce of Business		Mailing Address			01	MAY -1 F	PM 12: 37				
3020 HARTLE: JACKSONVILL	3020 HARTLEY ROAD. SUI JACKSONVILLE FL 32257	E 300		SEC TALL		_		11				
2. Principal Place of Business			3. Mailing Address				{	E(( 18(() B(()) B(()) B(()				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State				4. FEI Number 65–099		<del></del>	Applie	d For	]
Zip	Cou	ntry	Zip	Coun	itry			of Status Desired		8.75 Addition		1
	6. Name and A	ddress of Current Re	gistered Agent				7. Name and /	Address of New I				_
					Name							]
VESTCORE PARTNERS XXV, INC. 3020 HARTLEY ROAD, SUITE 300					Street Address (P.O. Box Number is Not Acceptable)							]
JACKSON	VILLE FL 32257				-		<del> </del>			T == 0		_
					City				FL	Zip Code		
SIGNATURE	Signature, typed or printed	name of registered agent and t	<del></del>	Registered	d Agent signatur		when reinstating)		DATE			
9. Capital Co as Shown	on record.	1,891,010.00	10. Amount of Capical in FLORIDA to car	te.			- <del></del>		SE SIDE FOR	FEE INFORMAT		ļ ·
			T IS A BUSINESS ENT NOT be changed on the							ner.		
12.	1	ENERAL PARTNER IN	FORMATION	13.				ADDRESS CH	ANGES ONLY	<u></u>		1
DOCUMENT #   B0000000232 NAME   VESTCOR PARTNERS XXV-A, L.P.				STRE	ET ADDRESS							03 (11/00)
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14. I hereby certify that the information supplied with this filing does not qualify or 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

Vestor Partners XXV, Inc.

Its General Partners

SIGNATURE:

SIGNATURE:

10. 19.07(3)(i), Florida Statutes. I further certify that the information indicated 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 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 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 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 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 exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes.

SIGNATURE:

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