2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

00109862 AT

DOCUMENT # A00000000970

1. Entity Name
COCONUT GROVE STATION DEVELOPMENT, LTD.

FILED
03 APR 30 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
12000 BISCAYNE BLVD SUITE 803 MIAMI FL 33181	12000 BISCAYNE BLVD SUITE 803 MIAMI FL 33181

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip / Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip / Country

DUE BY MAY 1, 2003

4. FEI Number 65-1028834 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COWAN, KEVIN D ESQ
SHUTTS & BOWEN LLP 1500 MIAMI CENTER
201 S BISCAYNE BLVD
MIAMI FL 33131

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $100.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

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 #	F00000003615	STREET ADDRESS	~~04/30/03--01117--026 **141.25~~
NAME	BVT DEVELOPMENT CORPORATION II		
STREET ADDRESS	12000 BISCAYNE BLVD SUITE 803		
CITY-ST-ZIP	MIAMI FL 33181	CITY-ST-ZIP	
DOCUMENT #	P99000030026	STREET ADDRESS	100017619221 04/30/03--01117--026 **141.25
NAME	SOUTH DIXIE/27, INC.		
STREET ADDRESS	12000 BISCAYNE BLVD SUITE 803		
CITY-ST-ZIP	MIAMI FL 33181	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP		CITY-ST-ZIP	

STAPLE CHECK HERE

CR2E003 (10/02)

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: SIGNATURE REQUIRED 4/16/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #