

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

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DOCUMENT # **A00000001441**

1. Entity Name  
**ADC EQUITY PARTNERS TUSCANY, LTD.**

02 APR 16 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business <b>2201 N.W. CORPORATE BLVD., SUITE 200 BOCA RATON FL 33431</b>	Mailing Address <b>2201 N.W. CORPORATE BLVD., SUITE 200 BOCA RATON FL 33431</b>
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2. Principal Place of Business		3. Mailing Address		<b>DUE BY MAY 1, 2002</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-1043613</b>	Applied For 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			7. Name and Address of New Registered Agent				
<b>ALTMAN DEVELOPMENT CORPORATION 2201 N.W. CORPORATE BLVD., SUITE 200 BOCA RATON FL 33431</b>			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			<b>FL</b>	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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. <b>\$7,500.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. <b>MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>
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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 # <b>856211</b>	NAME <b>ALTMAN DEVELOPMENT CORPORATION</b>	STREET ADDRESS	
	STREET ADDRESS <b>2201 N.W. CORPORATE BLVD., SUITE 200</b>	CITY-ST-ZIP	
	CITY-ST-ZIP <b>BOCA RATON FL 33431</b>		
DOCUMENT #	NAME	STREET ADDRESS	
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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

**ALTMAN DEVELOPMENT CORPORATION, GENERAL PARTNER**

SIGNATURE: BY: *[Signature]* **4/16/02** (561) 997-8661  
Date Daytime Phone #

CR2E003 (9/01)