## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

## A0000001453 DOCUMENT #

COCONUT CREEK COMMERCE PARK, LTD.



03 APR 28 AM II: 10 Principal Place of Business 2247 PALM BEACH LAKES BLVD., SUITE 204 2247 PALM BEACH LAKES BLVD., SUITE 204 SECULIARY OF STAR TATEMATICASSES, FEBRIDA WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** 4. FEI Number 65-1055101 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MACKEY, WALTER J JR. Street Address (P.O. Box Number is Not Acceptable) 2247 PALM BEACH LAKES BLVD., SUITE 204 WEST PALM BEACH FL 33409 City 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 Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$50,000.00 as Shown on record. in FLORIDA to date. 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 P99000044137 DOCUMENT # STREET ADDRESS MACKEY DEVELOPMENT, INC. NAME STREET ADDRESS 2247 PALM BEACH LAKES BLVD., SUITE 204 CITY-ST-7IP WEST PALM BEACH FL 33409 CITY-ST-ZIP DOCUMENT **#** 200017121062 STREET ADDRESS NAME <del>-04/28/93 --01016---005 - \*\*488.75</del> STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS ·NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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

INC., GENERAL PARTNER

STAPLE CHECK HERE

CITY-ST-7IP

SIGNATURE: By MACKEY, IR. PRES. 4/15/03 561-684-8811

CR2E003 (10/02)