2001 UNIFORM BUSINESS REPORT (UBR) A0000001722 DOCUMENT # 1. Entity Name R&V OF ISLAMORADA LTD. FILED 01 AUG 22 PM 12: 17: Principal Place of Business Mailing Address 88855 OLD HIGHWAY 88855 OLD HIGHWAY SECRETARY OF STATE TAVERNIER FL 33070 TAVERNIER FL 33070 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DUE BY SEPTEMBER 26, 2001 City & State City & State Applied For 65-1053670 Not Applicable Zip Country Country **\$8.75** Additional tificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOHATCH, JOHN S Street Address (P.O. Box Number is Not Acceptable) 2600 DOUGLAS ROAD, PENTHOUSE 8 **CORAL GABLES FL 33034** 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. 9. Capital Contributions \$1,000,000,00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 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 ADDRESS CHANGES ONLY 13. P00000105547 (5/01) DOCUMENT # STREET ADDRESS R&V OF ISLAMORADA, INC. NAME 88855 OLD HIGHWAY **CR2E003** STREET ADDRESS CITY-ST-ZIP **TAVERNIER FL 33070** CITY-ST-ZIP 200004560002-DOCUMENT # -08/28/01--01058--008 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 NAME 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-ZIK T ith this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information by that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership that report as regularly years. 14. I hereby certify that the information supplicated on this report is true and accurate the receiver or trustee empowere

SIGNATURE: