2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A0000002029 1. Entity Name						LED				
THE PHILIP ZIEKY PARTNERSHIP #2, LTD.					01 MAR 12 AM 10:38					
Principal Place of B		SECRETARY OF STATE ŢALLAHASSEE, FLORIDA								
C/O PHILIP Z	Mailing Address C/O PHILIP ZIEKY	~			SSEE, FLORIDA		V			
715 PINE LAKE DRIVE 715 PINE LAKE DRIVE				F				•		
DELRAY BEACH	i, FL 33445	DELRAY BEACH, FL	3344	15						
Principal Place of Business 3. Mailing Address					_		•	-		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Number 65–1062			-	pplied For ot Applicable	<u> </u>	
Zip	Country	Zip	Cour	ntry	5. Certificate of	of Status Desired		.75 Ad Require		
6.	Name and Address of Current R	tegistered Agent			7. Name and	Address of New Registe	red Age	nt]
ZIEKY; PHILIP				Name	****					
715 PINE LAKE DRIVE				Street Address (P.O. Box Number is Not Acceptable)						
DELRAY BEACH, FL 33445						, re				-
				City			FL	Zip Coc	de	1
8. The above name	ed entity submits this statement for	register	ed office or register	red agent, or both		1				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature require							ATE			4
 9Capital Contribu as Shown on rec 	tions\$1,900,000100	d Contri ate.	butions		31. MAKE CHECK PAY				-	
	A GENERAL PARTNER T	HAT IS A BUSINESS EN	TITY M	IUST BE REGIS	TERED AND A	CTIVE WITH THIS OF	FICE.	\F		
12.	NOTE: General Partners MA' GENERAL PARTNER		13.		it must be med	ADDRESS CHANGES				╛╴
DOCUMENT #				EET ADDRESS						1/00/
NAME ZIEKY, PHILIP STREET ADDRESS 715 PINE LAKE DRIVE					40003851234					3. T
	DETRAY BEACH, FT. 33445			/-ST-ZIP		-03/13/0 ****526	101	108-	-005 -26 25	് ീ T CR2E003 (11/00)
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STREET ADDRESS 2	ZIEKY, ELIOTT S. 215 SHERWOOD DRIVE GLASTONBURY, CT 06033			/-ST-ZIP			·		<u> </u>	7
CITY-ST-ZIP C									<u>.</u>	\dashv
NAME ZIEKY, JEFFREY M.				EET ADDRESS			·· <u> </u>			
	SCOTTSDALE, AZ 85259			r-ST-ZIP						١.
DOCUMENT / NAME	'			EET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			cim	Y-ST-ZIP						
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STREET ADDRESS CITY-ST-ZIP			CITY	Y-ST-ZIP						
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STREET ADDRESS CITY-ST-ZIP	;		CITY	Y-ST-ZIP			-			
dd thereby each	that the information supplied with	this filing does not qualify for	the exe	emption stated in Se	ection 119.07(3)(i)), Florida Statutes. I furthe	er certify	that the	information partnership o)r
indicated on th	its report is true and accurate and trustee empowered to execute this	that my signature shalt have t	ne sam	ie legal effect as if r	made under dath;	inati am a deneral rasin	ioi oi iiile		p.a., 10, 0111p C	
SIGNATURE: FLIGHT S ZIEKY 3/8/01 660 281 3474										
	" SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING GENERA	AL PARTNI			Date #			-	