APPRUVE

2002 UNIFORM BUSINESS REPORT (UBR)

ANO A01000000910 **DOCUMENT #** 1. Entity Name 02 APR 16 AM 8: 47 ALTMAN PARTNERS WINDSOR LAKES, LTD. SECRETARY OF STATE TAIL AHASSEE, FLORIDA Principal Place of Business Mailing Address 2201 CORPORATE BLVD. NW. SUITE 200 2201 CORPORATE BLVD. NW. SUITE 200 **BOCA RATON FL 33431 BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DUE BY MAY 1, 2002 Applied For City & State City & State 4. FEI Number 65-1121079 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JEFFREY A. DEUTCH, P.A. Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES ROAD, SUITE 300 **BOCA RATON FL 33434** Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$7,500.00 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 856211 DOCUMENT # STREET ADDRESS ALTMAN DEVELOPMENT CORPORATION NAME 2201 CORPORATE BLVD, NW, SUITE 200 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-ZIP DOCUMENT # STREET ADDRESS 600005314156--4 -04/22/02--01092--019 NAME STREET ADDRESS CITY-ST-ZIP ****141.25 ****141.25 CITY-ST-ZIF DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME * STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER