2002 UNIFORM BUSINESS	REPORT,	(UBR
-----------------------	---------	------

DOCUMENT # A0100001249  1. Entity Name				APPROVED AND FILED	
FINLAY INTERESTS 45, LTD.				02 APR 12 PM 4: 46	
Principal Place of Business Mailing Address 4300 MARSH LANDING BLVD SUITE 101 P.O. BOX 4961 JACKSONVILLE BEACH FL 32250 ORLANDO FL 32801				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business     3. Mailing Address					
Suite, Apt. #, etc. Suite, Apt. #, etc.		-			
City & State City & State			···	4. FEI Number Applied For	
Zip	Zip Country Zip Co		Cour	ntry	02-0545352   Not Applicable
	6 Name and Address of Current	Pagistered Acont			Fee Required
1	•			Name	7. Name and Address of New Registered Agent
B&C CORPORATE SERVICES OF CENT. FL., INC. 390 NORTH ORANGE AVE., SUITE 1100			Street Addres	ss (P.O. Box Number is Not Acceptable)	
ORLAND	ORLANDO FL 32801			City	<b>□</b> Zip Code
9 The shave			<del>_</del>		F┗_
o. The above	e named entity submits this statement to	or the purpose of changing	j its register	ed office or regis	stered agent, or both, in the State of Florida.
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable.	<del></del> _		DATE
9. Capital Co as Shown		10. Amount of Ca		butions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
. 4	A GENERAL PARTNER 1 NOTE: General Partners MA	THAT IS A BUSINESS AY NOT be changed or	ENTITY M	UST BE REGI	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
12.	GENERAL PARTNE		13.		ADDRESS CHANGES ONLY
DOCUMENT # NAME	L01000015774 Finlay interests GP 45, LLC		STRE	ET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	4300 MARSH LANDING BLVD., 3 JACKSONVILLE BEACH FL 3225		CITY	-ST-ZIP	2000052886528 -04/17/0201023003
DOCUMENT # NAME			STRE	ET ADDRESS	*****31.25 *****31.25
STREET ADDRESS CITY-ST-ZIP			CITY	- ST- ZIP	2000052886528
DOCUMENT # NAME			STRE	ET ADDRESS	-04/17/0201023004 *****50.00 *****50.00
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT # NAME			STRE	ET ADDRESS	
STREET AODRESS CITY-ST-ZIP			CITY-	-ST-ZIP	
DOCUMENT / NAME STREET ADDRESS			STRE	ET ADDRESS	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		CITY-	ST-ZIP	
OOCUMENT #		,	STREE	ET AODRESS	
CITY-ST-ZIP				ST-ZIP	
BY:FI BY:FI BY	rofusie engowere the execute the MI ay GP Holdings, Telescope Finlay Holdings, Telescope Holdings	this filing does not qualify that my signature shall have a report as required by the that have	for the exer ve the same apter 620, F	legal effect as if lorida Statutes	Section 119.07(3)(i), Florida Statutes. I further certify that the information made under oath; that I am a General Partner of the limited partnership or
SIGNAT	URE: Christopher C. Ffhr	BRIDED PAN OF SCHUNG GENE	ERAL PARTIE	3	Date Daytime Phone #