LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

	INIFORM BUSIN	iess report	r (U	BR)		
DOCU	JMENT # A010000	01609		· · · · · · · · · · · · · · · · · · ·	FILED	4
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BGI - PA	RTNERS-COOPER CR	EEK LIMITED PA	ARTNI	ERSHIP	TALLAHASSEE FLORIDA	
,	DO NOT WRIT	E IN THIS S	PAC	E,		HLM
Principal Place of Business 3. Mailing Address			·····	,	DO NOT WRITE IN THIS SPACE	
Suite, Apt	oth School Avenue	Suite, Apt. #, etc.	ov/Ac	apal	1010	
Scrite 500 Sity & State City & State					DUE BY MAY 1	· · · · · · · · · · · · · · · · · · ·
Salas	. ~,	Saras ota	_			Applied For Not Applicable
3423	7 Country OSA	34237		15A	5. Certificate of Status Desired See Requir	dditional
			!		7. Name and Address of Current Registered Agent	
	DO-NOT-V	VRITE.		Name Suo	H P. Bradley	
	IN THIS S			Street Address ((P.O. Box Number is Not Acceptable)	2
	IN THIS S	PACE.	e			
		····		City Sara	asota FL Zin Co	de 237
8. The above	named entity submits this statement	for the purpose of changing its	registere	d office or register	red agent, or both, in the State of Florida.	
SIGNATURE				_		
9. Capital Co	Signature, typed or printed name of registered age ontributions	nt and title if applicable. 10. Amount of Capita	al Contrib	utions	DATE	- ATTE
as Shown	on record. 1, 000	in FLORIDA to da	ate.	1.000 -	11. MAKE CHECK PAYABLE TO DEPT. O SEE REVERSE SIDE FOR FEE INFO	
	A GENERAL PARTNER NOTE: General Partners N	THAT IS A BUSINESS EN MAY NOT be changed on th	TITY MI ne form;	JST BE REGIST an amendmen	TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.	
12. DOCUMENT#	GENERAL PARTN	ER INFORMATION	Ţ			
NAME	Larry P. Lieberman Family Trustee 1 South & charl Avenue, Schite 500		STREE	T ADDRESS	600005664196	3
STREET ADDRESS CITY-ST-ZIP			CITY-	ST-ZIP	-06/03/0201024	011 g
DOCUMENT #	Larasota, FL 3423				****141_25 *****1	
NAME STREET ADDRESS			STREE	T ADDRESS		CR2
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ITY-ST-ZIP			CITY-S	T-ZIP		
OCUMENT # AME			STREET	ADDRESS		
TREET ADDRESS		CITY-S	T-71P			
ITY-ST-ZIP	ertify that the information supplied wit	h this filing days 2				
indicated of	on this report is true and a hur to and	that my signature shall have the tracking that the tracking signature shall have the signature of the tracking that the tracking the tracking that the tracking the tracking the tracking the tracking the tracking that the tracking the tracking that the tracking that the tracking t			ction 119.07(3)(i), Florida Statutes. I further certify that the ir ade under oath; that I am a General Partner of the limited pa	formation artnership or