

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02000001283

1. Entity Name
FORT LAUDERDALE COURTYARD II, LTD.



Principal Place of Business
ONE S.E. THIRD AVENUE, SUITE 3050
MIAMI FL 33131

Mailing Address
ONE S.E. THIRD AVENUE, SUITE 3050
MIAMI FL 33131

FILED
03 MAY -1 PM 6:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2003

City & State

City & State

4. FEI Number

76-0714163

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROSENBERG, DONALD S
ONE S.E. THIRD AVENUE, SUITE 3050
MIAMI FL 33131

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$1,800,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
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

13. ADDRESS CHANGES ONLY

DOCUMENT # L02000024098
NAME KGN/BRADLEY ASSOCIATES FLORIDA, LLC
STREET ADDRESS ONE S.E. THIRD AVENUE, SUITE 3050
CITY-ST-ZIP MIAMI FL 33131

STREET ADDRESS

CITY-ST-ZIP

600017834916

DOCUMENT # L02000014933
NAME COURTYARD GENERAL PARTNERS, LLC
STREET ADDRESS 1065 KANE CONCOURSE, SUITE 201
CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154

STREET ADDRESS

CITY-ST-ZIP

05/01/03--01062--013 **590.00

DOCUMENT #
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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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/24/03

Date

Daytime Phone #

CR2E003 (10/02)

0001188 AV