

Due By September 8, 2004

DOCUMENT # A02000001399

1. Entity Name
152 ALEXANDER PALM DEVELOPMENT PARTNERS I,
LTD.



Principal Place of Business
464 ADDISON PARK LANE
BOCA RATON, FL 33432

Mailing Address
464 ADDISON PARK LANE
BOCA RATON, FL 33432

FILED

04 MAY 21 PM 12:23



TALLAHASSEE, FLORIDA

03142003 Chg-LP CR2E003 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1181 S. ROGERS CIRCLE

1181 S. ROGERS CIRCLE
SUITE 31

City & State

SUITE 31

BOCA RATON, FL 33487

4. FEI Number

16-0717135

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

152 ALEXANDER PALM DEVELOPMENT PARTNERS I
464 ADDISON PARK LANE
BOCA RATON, FL 33432

Name

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

1181 S. ROGERS CIRCLE

SUITE 31

City

BOCA RATON, FL 33487 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.

\$261,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # P02000112539
NAME 152 ALEXANDER PALM DEVELOPMENT PARTNERS I
STREET ADDRESS 464 ADDISON PARK LANE
CITY-ST-ZIP BOCA RATON, FL 33432

STREET ADDRESS

CITY-ST-ZIP

1181 S. ROGERS CIRCLE
SUITE 31

BOCA RATON, FL 33487

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 626, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF GENERAL PARTNER

DATE

Devin's Fyfe #

STAPLE CHECK HERE

5/21
just

5/20/04