## LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

A02000001610

1. Entity Name

ADC EOUITY PARTNERS TAMARAC



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D 3. Mailing Address DO NOT WRITE IN THIS SPACE DUE BY MAY 1 4 FFI Number Applied For 03-0495392 Not Applicable Country 7in \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of Current Registered Agent Name Jeffrey A. Deutch, P.A. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) 7777 Glades Road, Suite 300 IN THIS SPACE City Boca Raton 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 10, Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 9. Capital Contributions 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. GENERAL PARTNER INFORMATION 12. 856211 DOCUMENT # STREET ADDRESS NAME Altman Development Corporation STREET ADDRESS 2201 Corporate Blvd., NW, #200 CITY-ST-ZIP CITY-ST-ZIP Boca Raton, FL 33431 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP 04/16/03--01034--006 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS DO NOT-WRITE CITY-ST-ZIP CITY-ST-7IP DOCHMENT # IN THIS SPACE STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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)(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, G.P. SIGNATURE: BY:

OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE AND TYPE

4/4/03

(561) 997-8661