

2001 UNIFORM BUSINESS REPORT (UBR)

0000132 AF

DOCUMENT # A06577

1. Entity Name

WORTH AVENUE ASSOCIATES, LTD.

FILED

01 MAY -1 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O THE GOODMAN COMPANY
777 S. FLAGLER DRIVE SUITE 1101E
WEST PALM BEACH FL 33401

Mailing Address
C/O THE GOODMAN COMPANY
777 S. FLAGLER DRIVE SUITE 1101E
WEST PALM BEACH FL 33401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-2078885

Applied For

Not Applicable

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

SHEWALTER, WILLIAM A
% THE GOODMAN COMPANY
777 SOUTH FLAGLER DR., SUITE 1101E
WEST PALM BEACH FL 33401

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$5,733,617.00

10. Amount of Capital Contributions
in FLORIDA to date.

5,733,617

11. MAKE CHECK PAYABLE TO 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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # L98000001831
NAME ESPLANADE GP LLC
STREET ADDRESS 777 S. FLAGLER DR.
CITY-ST-ZIP W. PALM BEACH FL 33401

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

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STREET ADDRESS

CITY-ST-ZIP

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****535.00 ****535.00

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.

Esplanade GP LLC, general partner, by Goodman Properties, Inc., its manager

SIGNATURE: *William A. Shewalter*
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER
William A. Shewalter, Vice President

9-23-01

Date

561-833-3777

Daytime Phone #

CR2E003 (11/00)