2001 UNIFORM BUSINESS REPORT (UBR)

2001 UNIFORM BUSINESS REPORT (UBR)					APPROVEL	
DOCUMENT # A09948 1. Entity Name			, a		FILLED	
FERNAN	DO ASSOCIATES, LTD.				01 APR 30 PM 12: 01	•
Principal Place of Business 2000 S. COLORADO BLVD TWR 2, STE. 2-1000 DENVER CO 80222 Mailing Address 2000 S. COLORADO BLVD DENVER CO 80222			TWR 2. STE. 2-1000		SECRETARY OF STATE TAGLAHASSEE, FLORIDA	
Principal Place of Business 3. Mailing Address				···		
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State City & State				4. FEI Number Applied For Not Applied For		Applied For Not Applicable
Zip	Zip Country Zip		Country			Additional
	6. Name and Address of Current R	legistered Agent			7. Name and Address of New Registered Agent	
				Name		
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525						ĺ
				City FL Zip Code		Code
8. The above named entity submits this statement for the purpose of changing its egistered 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. \$250,000.00 10. Amount of Capital Coin FLORIDA to do te.						
A GENERAL PARTNER THAT IS A BUSINESS EN 'ITY 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 #	THE RELATED COMPANIES, INC. 625 MADISON AVE.			STREET ADDRESS		11/00)
				'-ST-ZIP		CR2E003 (1)
DOCUMENT #	OCUMENT # 617998 THE RELATED COMPANIES OF FLORIDA, INC. TREET ADDRESS 4125 LAGUNA ST.			EET ADORESS		
NAME STREET ADDRESS CITY-ST-ZIP				-ST-ZIP	6000042174965 -05/15/0101084026	
DOCUMENT #	UMENT / F97000001937			EET ADDRESS		*526.25
STREET ADDRESS 2000 S. COLORADO BLVD., TWR 2, STE. 2-1000 DENVER CO 80222			CITY	-ST-ZIP		
DOCUMENT # NAME			STRE	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT # NAME			STRE	EET ADDRESS		
STREET ADDRESS CITY-ST::ZIP			CITY	-ST-ZIP		
DOCUMENT# NAME			STRE	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			J	-ST-ZIP		
14. Thereby 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 Fernando Associates, Ltd. by its managing General Partner, SF General, Inc.						
SIGNATURE: By: SIGNATURE By: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENE! AL PARTNER Deborah Chesi, Asst. Secy 4-26-01 (303) 757-8101						