

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0020693 MB

DOCUMENT # **A12509**

1. Entity Name
187TH ST. HOUSING LIMITED PARTNERSHIP



FILED

03 APR 10 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**12100 WILSHIRE BLVD.
SUITE 1400
LOS ANGELES CA 90025**

Mailing Address
**12100 WILSHIRE BLVD.
SUITE 1400
LOS ANGELES CA 90025**

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 **58-1619711**

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

**DOUGLAS H. REYNOLDS, P.A.
4875 NORTH FEDERAL HIGHWAY, 10TH FLOOR
SOUTHTRUST BANK BUILDING
FORT LAUDERDALE FL 33308**

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

9. Capital Contributions as Shown on record. **\$626,068.00**

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 # **P04497**
NAME **WILSHIRE INVESTMENTS COR**
STREET ADDRESS **12100 WILSHIRE BLVD**
CITY-ST-ZIP **LOS ANGELES CA**

STREET ADDRESS
CITY-ST-ZIP **04/10/03--01092--007 **526.25**

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP **M THOMAS**

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
Wilshire Investments Corporation, By: Jay Wall, Vice President

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/2/03
Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE