

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A13193**

1. Entity Name

BOYNTON ASSOCIATES, LTD.

Principal Place of Business

**5505 N. ATLANTIC AVE., #115
COCOA BEACH FL 32931**

Mailing Address

**5505 N. ATLANTIC AVE., #115
COCOA BEACH FL 32931**

2. Principal Place of Business

3. Mailing Address

9090 Wilshire Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

201

City & State

City & State

Beverly Hills, CA

Zip

Country

Zip

Country

90211

Los Angeles

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

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.

\$310,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **P32511**
NAME **ROSEWOOD APARTMENTS CORPORATION**
STREET ADDRESS **9090 WILSHIRE BLVD., SUITE 201**
CITY-ST-ZIP **BEVERLY HILLS CA 90211**

STREET ADDRESS

CITY-ST-ZIP

500003631955--1

-02/05/01--01006--014

******535.00 ****535.00**

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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

SIGNATURE:

Jeffrey H. Sussman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Sussman, S.V.P. 1/17/01 (310)385-3021

Date

Daytime Phone #

FILED

01 JAN 30 PM 9:57

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



DO NOT WRITE IN THIS SPACE

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CR2E003 (1/1/00)