200	. 0111	ronin bosi	NESS NEPU	'n i	(UD	n)				
DOCUMENT # A19854 1. Entity Name										
ROYAL PALM BEACH COLONY, LIMITED PARTNERSHIP							F	ILED		n
Principal Place of Business Mailing Address							O1 AP	R-4 AM 9 C	8 (· A
2501 SOUTH HOLLYWOOD		:	2501 SOUTH OCEAN DRIVE HOLLYWOOD FL 33019				SECRE	TARY OF STATE		V They stak elek ayan kas
Principal Place of Business Amailing Address									ii	<u> </u>
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.					DO NOT WRITE II	N THIS SF	PACE
City & State			City & State			4	. FEI Numbe	59-2501059		Applied For Not Applicable
Zip		Zip	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required						
	6. Name	and Address of Current R	legistered Agent			7.	Name and	Address of New Regis	stered Ag	ent
FROST, IRWIN M					Name					
					Street A	Address (P.O. Box Number is Not Acceptable)				
200 S. BISCAYNE BLVD., #4750					14					
MIAMI FL 33131										
					City	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 enent an	d title if annilrable (NOTE	- Ranistara	d Agent signat	ure required when	n seinstatina)		DATE	'r
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent 9. Capital Contributions 10. Amount of Capital Contribution:							in remistating)	11. MAKE CHECK P.		O DEPT OF STATE
as Shown		\$28,314,744.00	ate.	Barions	•				FEE INFORMATION	
	AC	GENERAL PARTNER TH	IAT IS A BUSINESS EN	TIŢY M	UST BE I	REGISTER	ED AND A	TIVE WITH THIS O	FFICE.	
NOTE: General Partners MAY NOT be changed on the 12. GENERAL PARTNER INFORMATION					; an ame	nament m	ust be filed	ADDRESS CHANG		er.
DOCUMENT #	1			13.		,		ADDITION OF FRIE	20 01121	
NAME	STEIN MAN	NAGEMENT CO. INC			ET ADDRESS					
	2501 S. 00 HOLLYWO	cean drive od Fl			-ST-ZIP					
DOCUMENT / A30968 NAME HASAM REALTY LIMITED PAR					ET ADDRESS		1	000039	93!	5712
STREET ADDRESS 2501 S. OCEAN DRIVE HOLLYWOOD FL			ст		-ST-ZIP			-04/12/0 ****526		025003 ****526.25
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STREET ADDRESS CITY-ST-ZIP					-ST-ZIP		1			
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STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP		1			
DOCUMENT # NAME				STRE	ET ADDRESS			· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS CITY-ST-ZIP			,	CITY	-ST-ZIP			•		
DOCUMENT # NAME				STRE	ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				CITY-	-ST-ZIP					

14. I hereby certify that the information supplied the disconnection of the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of the limited partner 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 of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee of the limited partnership or the receiver or trustee.

SIGNATURE:

| Date | Dayling Phone | Dayling