2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A20718 1. Entity Name WEST PALM BEACH INVESTORS, LTD.				Mar 28, 2000 08:00 AM Secretary of State
400 E. SOUTH ST. 40 SUITE 500 SU ORLANDO FL O.	Mailing Address · 10 E. SOUTH ST. UITE 500 RLANDO 12801		FL	
	Mailing Address os. orange avenue			
	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
City & State ORLANDO FL 0	City & State RLANDO		FL	4. FEI Number Applied For 59-2590659 Not Applicab
Zip Country	Zip sso1	Count	ry	5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Current Regi				Fee Required 7. Name and Address of New Registered Agent
BOURNE ROBERT A 400 E. SOUTH ST. SUITE 500				
ORLANDO FL 32801 US				•
			City ORLAN	NDO FL Zip Code
8. The above named entity submits this statement for the	ORLANDO ORLANDO TL 32801 The purpose of changing its registered office or registered agent, or both, in the State of Florida. 03/28/2000			
SIGNATURE				nature required when reinstating) DATE
as Shown on record. 1,750,000.00 in FLORIDA to date			50,000.0	SEE REVERSE SIDE FOR FEE INFORMATION
A GENERAL PARTNER THAT NOTE: General Partners MAY N	IS A BUSINESS ENT	FITY MI	JST BE I	E REGISTERED AND ACTIVE WITH THIS OFFICE.
12. GENERAL PARTNER INF		13.		ADDRESS CHANGES ONLY
DOCUMENT / VAME TOMFORDE ERNEST L		STREE	T ADDRESS	s
STREET ADDRESS 122 S.W. 11TH COURT STORY-ST-ZIP BOCA RATON	FL 33486	CITY-	ST-ZIP	
DOCUMENT# NAME BISHOP JOHN E		STREE	T ADDRESS	s
STREET ADDRESS 3 CHURCH CIRCLE-208 CITY-ST-ZIP ANNAPOLIS	MD 21401	CITY-	ST-ZIP	
DOCUMENT # BOURNE ROBERT A		STREE	T ADDRESS	\$ 450 S. ORANGE AVENUE
STREET ADDRESS 400 E. SOUTH ST. #500 CITY-ST-ZIP ORLANDO	FL	CITY-	ST-ZIP	ORLANDO FL
DOCUMENT # NAME SENEFF JAMES MJR.		STREE	T ADDRESS	S 450 S. ORANGE AVENUE
STREET ADDRESS 400 E. SOUTH ST. #500 CITY-ST-ZIP ORLANDO	FL	CITY-	ST-ZIP	ORLANDO FL
DOCUMENT ≠ NAME		STREE	T ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-	ST-ZIP	
Document \$ Vame		STREE	T ADDRESS	;
STREET ADDRESS CITY-ST-ZIP		CITY-S		tated in Section 110.07(2)() Slatide Ptolyton Leuther and the information

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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