

2001 UNIFORM BUSINESS REPORT (UBR)

0007609 AF

DOCUMENT # A21718
 1. Entity Name
PALM BEACH LAKES, LTD.

FILED
 01 APR 27 PM 4:37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 2201 CORPORATE BLVD., N.W., SUITE 200 2201 CORPORATE BLVD., N.W., SUITE 200
 BOCA RATON FL 33431 BOCA RATON FL 33431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEI Number Applied For
38-2681502 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DEUTCH, JEFFREY A.
% BROAD AND CASSEL
7777 GLADES RD.
BOCA RATON FL 33434

7. Name and Address of New Registered Agent
 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 _____ (NOT: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$990.00 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	
DOCUMENT #	856211
NAME	ALTMAN DEVELOPMENT CORP.
STREET ADDRESS	2201 CORP. BLVD., N.W.
CITY-ST-ZIP	BOCA RATON FL 33431
DOCUMENT #	
NAME	ALTMAN, JOEL L.
STREET ADDRESS	2201 CORP. BLVD., N.W.
CITY-ST-ZIP	BOCA RATON FL 33431
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	900004324269--3
CITY-ST-ZIP	-05/25/01--01102--006 ****141.25 ****141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	BK
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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.
 Altman Development Corporation, General Partner

SIGNATURE: _____ By: _____ SIGNATURE REQUIRED
 Date: 4/24/01 Daytime Phone #: (561) 997-8661

CR2E003 (11/00)