## 2001 UNIFORM BUSINESS REPORT (UBR) APPROVE DOCUMENT # A22953 1. Entity Name U. S. REALTY PARTNERS LIMITED PARTNERSHIP 01 APR 30 PM 12: 19 SECRETARY OF STATE TARETAHASSEE, FLORIDA Principal Place of Business Mailing Address 2000 S. COLORADO BLVD., TWR. 2, #2-1000 2000 S. COLORADO BLVD., TWR. 2, #2-1000 DENVER CO 80222 DENVER CO 80222 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 57-0814502 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City 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) 10. Amount of Capita Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE'S 9. Capital Contributions \$8,248,500.00 in FLORIDA to date. as Shown on record SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS EN' ITY 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 ADDRESS CHANGES ONLY CR2E003 (11/00) DOCUMENT # STREET ADDRESS TUCK, N. BARTON, JR. NAME ione insignia financial plaza STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GREENVILLE SC DOCUMENT # STREET ADDRESS NAME u.s. realty I corp. STREET ADDRESS 12000 S. COLORADO BLVD., TWR. 2, #2-1000 CiTY-ST-7IP CITY-ST-ZIP DENVER CO 80222 DOCUMENT # STREET ADDRESS 400004241924---05/17/01--01042--006 NAME STREET ADDRESS CITY-ST-ZIP \*\*\*\*526,25 \*\*\*\*526.25 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIF DOCHMENT # STREET ADDRESS NAME 1 STREET'ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 Chai ter 620, Florida Statutes

U.S. Realty Partners Limited Partnership by itsManaging GP, U.S. Realty I Corporation Deborah Chesi Asst. Secy 4-26-01 (303) 757-8101 SIGNATURES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENE! AL PARTNER

Daytime Phone #