

2001 UNIFORM BUSINESS REPORT (UBR)

0001339 AI

DOCUMENT #	A26063
1. Entity Name	
ADC EQUITY PARTNERS - 1986, LTD.	

FILED

01 AUG 13 PM 12:17

Principal Place of Business	Mailing Address
C/O ALTMAN DEVELOPMENT CORPORATION 2201 CORPORATE BLVD., NW., SUITE # 200 BOCA RATON FL 33431	C/O ALTMAN DEVELOPMENT CORPORATION 2201 CORPORATE BLVD., NW., SUITE # 200 BOCA RATON FL 33431

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

DUE BY SEPTEMBER 26, 2001

4. FEI Number	38-2798741	Applied For
		Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BROAD AND CASSEL 7777 GLADES ROAD SUITE 300 BOCA RATON FL 33431

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating).	DATE
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9. Capital Contributions	\$400.00	10. Amount of Capital Contributions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE
as Shown on record.		in FLORIDA to date.	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 #	856211	STREET ADDRESS	
NAME	ALTMAN DEVELOPMENT CORP	CITY-ST-ZIP	
STREET ADDRESS	2201 CORPORATE BLVD. # 200	STREET ADDRESS	300004539143--7
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	-08/17/01--01004--019
DOCUMENT #		STREET ADDRESS	****541.25 ****541.25
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		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 Chapter 620, Florida Statutes

Altman Development Corporation, General Partner

SIGNATURE:	SIGNATURE REQUIRED	8/1/01	(561)997-8661
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	Daytime Phone #

CR2E003 (5/01)