


# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0003870 AV

**DOCUMENT # A26494**


1. Entity Name  
**2500 ASSOCIATES, LTD.**



FILED

03 JAN 28 AM 9:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**140 N. FEDERAL HIGHWAY, STE. #200  
BOCA RATON FL 33432**

Mailing Address  
**140 N. FEDERAL HIGHWAY, STE. #200  
BOCA RATON FL 33432**

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

**DUE BY MAY 1, 2003**

4. FEI Number **59-2793506** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**TALBOTT, GREGORY K.**  
**140 N. FEDERAL HIGHWAY, STE. #200**  
**BOCA RATON FL 33432**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$2,000.00**

10. Amount of Capital Contributions in FLORIDA to date. \_\_\_\_\_

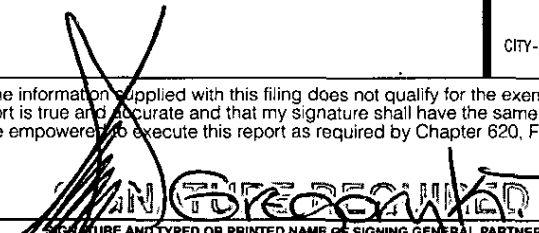
**11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**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 #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>M82867<br/>TALBOTT PARTNERS, INC.<br/>140 N. FEDERAL HIGHWAY, STE. #200<br/>BOCA RATON FL 33432</b> |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
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| 13. ADDRESS CHANGES ONLY |                                      |
|--------------------------|--------------------------------------|
| STREET ADDRESS           |                                      |
| CITY-ST-ZIP              | <b>100011136601</b>                  |
| STREET ADDRESS           | <b>01/28/03--01067--011 **150.00</b> |
| CITY-ST-ZIP              |                                      |
| STREET ADDRESS           |                                      |
| CITY-ST-ZIP              |                                      |
| STREET ADDRESS           |                                      |
| CITY-ST-ZIP              |                                      |
| STREET ADDRESS           |                                      |
| 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

SIGNATURE:  **Talbott** 1/23/03 **8525**

Date Daytime Phone #

CR2E003 (10/02)