2000 UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # A28450 1. Entity Name DENWEST FOODS, LTD.								Feb 01, 2000 08:00 AM Secretary of State				
Principal Place 400 EAST SOUT SUITE 500 ORLANDO 32801	ce of Business	S FL	400 SUI	eiling Address · EAST SOUTH STREET TE 500 ANDO		FL	<u> </u>					
			450	3. Mailing Address 450 S. ORANGE AVENUE Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat orLando Zip	te	FL Country	ORI	City & State Ando	Count	FL		4. FEI Number 59-29842	42		S8 7	Applied For Not Applicable 75 Additional
32801		and Address of Curren	3280					5. Certificate d	of Status Desired		Fee F	Required
		7. Name and Address of New Registered Agent										
BOURNE ROBERT A 400 EAST SOUTH STREET SUITE 500 ORLANDO FL 32801 US							Address (P.O. Box Number is Not Acceptable) DRANGE AVENUE . Zip Code					
9. Capital Contributions as Shown on record. 3,000,000.00 in FLORIDA to date						Agent signal utions 00,000.0	ure required	when roinstating)	112 MAKE CHE	02/01 DATE CK PAYABLI ISE SIDE FO	TO D	EPT, OF STATE
	A C NOTE:	ENERAL PARTNER General Partners M	THAT I	S A BUSINESS ENT T be changed on the	FITY MU e form;	JST BE I an ame	REGIST Indment	ERED AND AC must be filed	TIVE WITH TH to change a g	IS OFFICI eneral par	E. tner.	
12. GENERAL PARTNER INFORMATION							ADDRESS CHANGES ONLY					
DOCUMENT # NAME STREET ADDRESS	CNL GROWTH PARTNERS, LTD 400 EAST S. STREET, #500				STREE	T ADDRESS	450 S. ORANGE AVENUE					
CITY-ST-ZIP	ORLANDO			FL	SI-ZIP ORLAI		NDO FL 32			32801	2801	
DOCUMENT # VAME STREET ADDRESS	CNL GROWTH PARTNERS, INC					T ADORESS	450 S. G	50 S. ORANGE AVENUE				
CITY-ST-ZIP	ORLANDO	STREET, #500		FL	CITY-	ST-ZIP	ORLAI	NDO		FL	32801	l
DOCUMENT # NAME STREET ADDRESS					STREE	T ADDRESS				,		
CITY-ST-ZIP					CITY-:	ST-ZIP						
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DOCUMENT # NAME					STREE	T ADDRESS						
STREET ADDRESS CITY-ST-ZIP					CITY-S	ST-ZIP						
DOCUMENT # VAME					STREE	T ADDRESS						
STREET ADDRESS CITY-ST-ZIP					CITY-8	ST-ZIP						

DODEDT A DOLIDME DESCRIPENT OF CD

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