

# 2001 UNIFORM BUSINESS REPORT (UBR)

0019856 AB

DOCUMENT # **A28981**

1. Entity Name

**FORT WORTH ASSOCIATES, LTD.**

**FILED** *WR 5/10*  
**01 APR 27 PM 3:23**  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>300 SOUTHEAST FIFTH AVENUE UNIT 8100-A BOCA RATON FL 33432</b>	Mailing Address <b>100 N. WILKES-BARRE BLVD. WILKES-BARRE PA 18702 US</b>
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2. Principal Place of Business <b>225 NE MIZNER BLVD. SUITE 675A BOCA RATON FL</b>	3. Mailing Address <b>90 TAX DEPARTMENT 47A FLOOR BOCA RATON FL</b>
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Zip <b>33432</b>	Country <b>US</b>	Zip <b>33432</b>	Country <b>US</b>
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4. FEI Number <b>52-1647395</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**S. H. LIMITED INVESTMENT CORPORATION  
300 SOUTHEAST FIFTH AVENUE, UNITE 8100-A  
BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name  
**S.H. LIMITED INVESTMENT CORPORATION**

Street Address (P.O. Box Number is Not Acceptable)  
**225 NE MIZNER BLVD. SUITE 675A**

City  
**BOCA RATON** FL Zip Code  
**33432**

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 *Marie Spondra Secretary* DATE **4/24/01**

Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. <b>\$990.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 # <b>S67603</b>	<b>S.H. LIMITED INVESTMENT CORPORATION 300 SE 5TH AVE, #8100-A BOCA RATON FL</b>
DOCUMENT #	
DOCUMENT #	
DOCUMENT #	
DOCUMENT #	
DOCUMENT #	
DOCUMENT #	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	<b>225 NE MIZNER BLVD SUITE 675A</b>
CITY-ST-ZIP	<b>BOCA RATON FL 33432</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>700004217547--4 -05/15/01--01089--001</b>
CITY-ST-ZIP	<b>***141.25 ***141.25</b>
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: *Marie Spondra Secretary* DATE **4/24/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)