

2001 UNIFORM BUSINESS REPORT (UBR)

0015664 AF

DOCUMENT # A29394
 1. Entity Name
EASTMEADOW DISTRIBUTION CENTER L.P., A GEORGIA L

FILED

Principal Place of Business
REALTY INVESTORS LLC. UBS BRINSON
242 TRIMBULL ST.
HARTFORD CT 06103-1205

Mailing Address
REALTY INVESTORS LLC. UBS BRINSON
242 TRIMBULL ST.
HARTFORD CT 06103-1205

01 MAY -2 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business
c/o UBS Realty Investors LLC

3. Mailing Address
c/o UBS Realty Investors LLC

Suite, Apt. #, etc.
242 Trumbull St.

Suite, Apt. #, etc.
242 Trumbull St.

City & State
Hartford, CT

City & State
Hartford, CT

Zip
06103-1212

Country

Zip
06103-1212

Country

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City
Tallahassee

FL Zip Code
32301

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 *Michelle Pabky* Authorized Representative 04/30/01
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. **\$9,105,310.00**

10. Amount of Capital Contributions in FLORIDA to date. **0**

11. MAKE CHECK PAYABLE TO 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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	800878
NAME	AETNA LIFE INSURANCE CO.
STREET ADDRESS	151 FARMINGTON AVENUE(IG4R)
CITY-ST-ZIP	HARTFORD CT 06156-9636
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700004302517--3
CITY-ST-ZIP	-05/23/01--01082--012
STREET ADDRESS	****141.25 ****141.25
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

UBS REALTY INVESTORS LLC, its Investment Advisor and Agent

SIGNATURE: *Matthew H. Lynch* **Matthew H. Lynch, Secretary** 04/04/01 (860) 275-3920
 Signature and typed or printed name of signing general partner Date Daytime Phone #

CR2E003 (11/00)