FILED

2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

A30313 DOCUMENT

1. Entity Name PLAZA IV ASSOCIATES, LTD.



03 MAR TO AM TO: 210 Principal Place of Business 8214 WESTCHESTER. 9TH FLOOR Mailing Address 8214 WESTCHESTER. 9TH FLOOR SECRETARY OF STATE TALLAHASSEE, FLORIDA DALLAS TX 75225 DALLAS TX 75225 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** City & State City & State 4. FEI Number Applied For 75-2373647 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BEARD, RICHARD A III Street Address (P.O. Box Number is Not Acceptable) 100 N. TAMPA STREET STE.9475 2175 **TAMPA FL 33602** 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 Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$100.00 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 ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS TAMPA PLAZA IV COMPANY, LTD. NAME - **0000137367** 03/10/03--01084--012 8214 WESTCHESTER, 9TH FLOOR STREET ADDRESS CITY-ST-ZIP DALLAS TX 75225 CITY-ST-ZIP **150.00 A30032 DOCUMENT # STREET ADDRESS NAME AIG TAMPA LIMITED PARTNERSHIP **70 PINE STREET** STREET ADDRESS CITY-ST-ZIP **NEW YORK NY** CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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 WRC Holdings, Inc.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

William R. Cooper, President 3/3/03 214/360-1830

CR2E003 (10/02)