2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED
02 APR 24 AM 10: 14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A30408

1. Entity Name

ESSEX FLORIDA ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
C/O JAMES C. ELWOOD 5872 PENNOCK POINT ROAD JUPITER FL 33458	C/O JAMES C. ELWOOD 5872 PENNOCK POINT ROAD JUPITER FL 33458
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, 2002

4. FEI Number 65-0208450 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NOWICKI, MARK J., ESQ. 1155 US HIGHWAY ONE JUNO BEACH FL 33408	Name: JAMES C. ELWOOD Street Address (P.O. Box Number is Not Acceptable): 5872 PENNOCK POINT ROAD City: JUPITER FL Zip Code: 33458

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 [signature] JAMES C. ELWOOD, PRESIDENT 4/22/02
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. $356,990.00

10. Amount of Capital Contributions in FLORIDA to date. 356,990

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 the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L86373	STREET ADDRESS	
NAME	WARWICK INTERESTS, INC. C/O JAMES C. ELWOO		
STREET ADDRESS	5872 PENNOCK POINT RD.	CITY-ST-ZIP	
CITY-ST-ZIP	JUPITER FL		
DOCUMENT #		STREET ADDRESS	900005481089--1 -05/07/02--01049--013
NAME			
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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: [signature] JAMES C. ELWOOD PRESIDENT OF CORP G.P. 4/22/02 561-351-5540
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)