

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A30832

1. Entity Name

R.I.A. MELBOURNE LIMITED PARTNERSHIP

Principal Place of Business

23200 X X X X X X X X X X X X
BEACHWOOD, OH 44122

Mailing Address

23200 X X X X X X X X X X X X
BEACHWOOD, OH 44122

2. Principal Place of Business

3355 RICHMOND ROAD

Suite, Apt. #, etc.

SUITE 231A

City & State

BEACHWOOD, OH

Zip

44122

Country

USA

3. Mailing Address

3355 RICHMOND ROAD

Suite, Apt. #, etc.

SUITE 231A

City & State

BEACHWOOD, OH

Zip

44122

Country

USA

FILED

02 JAN 14 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DUE BY MAY 1, 2002

4. FEI Number

34-1663948

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record:

\$2,895,000.00

10. Amount of Capital Contributions
in FLORIDA to date:

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 #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

3355 RICHMOND ROAD, SUITE 231A

CITY-ST-ZIP

BEACHWOOD, OH 44122

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STREET ADDRESS
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3355 RICHMOND ROAD, SUITE 231A

CITY-ST-ZIP

BEACHWOOD, OH 44122

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

400004779024-7
01/16/02-01084-021
****535.00 ****535.00

CITY-ST-ZIP

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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:  **SIGNATURE REQUIRED** Ned S. Weingart

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Jan. 8, 2002

(216) 595-0780

Date

Daytime Phone #

00100
889567
AB

CR2E003 (9/01)