2000 UNIFORM BUSINESS REPORT (UBR)

FILED

 Entity Nan 	MENT # A s foods 11, ltd.	32602					į.	01, 2000 cretary			M
Principal Place of Business Mailing A			ailing Address	g Address							
400 EAST SOUTH ST., SUITE 500 40			400 EAST SOUTH ST., SUITE 500								
ORLANDO 32801		FL ORI	ANDO DI		FL						
450 S. ORANGE AVENUE 450			Mailing Address 0 s. orange avenue								
			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta	te	i i	City & State LANDO		FL		4. FEI Numbe 59-30971			-	Applied For Not Applicable
Zip 32801	Country	3280 ess of Current Regis		Count	try		5. Certificate of	of Status Desired		\$8.7 Fee Re	5 Additional equired
				7. Name and	Address of New	Registered	Agent				
BOURNE ROBERT A 400 EAST SOUTH STREET, SUITE 500					Name BOURN Street A						
ORLANDO FL					450 S. O	RANGE .	AVENUE	18 Not Acceptabl			
32801					City	Zip Code					
8. The above	named entity submits th	is statement for the p	urpose of changing its re	egistere	ORLAN d office or		ed agent, or both	, in the State of Fl			801
SIGNATURE	Signature, typed or printed name						when reinstating)		02/01	/ 2 00	0
9. Capital Contributions 10. Amount of Capital					utions		witen (existating)	11. MAKE CHE	DATE CK PAYABIJ	TO DE	PT. OF STATE
as Shown on record. 2,000,000.00 in FLORIDA to date A GENERAL PARTNER THAT IS A BUSINESS ENTI					2,000,000.00 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE					INFORMATION	
12.	NOIE: General	Partners MAY NO	The changed on the	form;	an ame	ndment	must be filed	l to change a g	eneral par	tner.	····
DOCUMENT #	GENERAL PARTNER INFORMATION			13.			·	ADDRESS CH	ANGES ON	LY	
NAME STREET ADDRESS	CNL GROWTH PARTNERS, LTD.			STREE	et address	450 S. 0	ORANGE AVEN	UE			
CITY-ST-ZIP	400 E. SOUTH ST., #50 ORLANDO	FL	CITY-	ST-ZIP	ORLANDO			FL	32801		
DOCUMENT #	CNL GROWTH PARTNERS INC.				T ADORESS	450 S. C	450 S. ORANGE AVENUE				
STREET ADDRESS CITY-ST-ZIP	400 E. SOUTH ST., #50 ORLANDO	FL	CITY-	ST-ZIP	ORLAI	RLANDO FL 32801					
DOCUMENT # NAME				STREE	T ADDRESS				,		
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DODEDT A DOLIDME DESCRIPENT OF CD

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