## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # A33384

1. Entity Name

COMMERCE LIMITED PARTNERSHIP #8911

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

Principal Place of Business 1280 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442 Mailing Address

1280 WEST NEWPORT CENTER DRIVE DEERFIELD BEACH FL 33442-7733 FILEO SECRETARY OF STATE DIVISION OF CORPORATIONS

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Principal Place of Business		-3. Mailing Address		I (COLOY) (BEE (1/190 )) (BO (1/10) (BO) SION SION DISH BISH COOK COOK (BO)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number 65-0354	632	Applied For Not Applicable
Zip	Country	Zip	Coun	try .	5. Certificate of Status Desire	•d 🗀	\$8.75 Additional Fee Required. —
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
O'BOYLE, SHEILA L. 23 N. HIDDEN HARBOUR DR.				Name Street Address (P.O. Box Number is Not Acceptable)			
GULFSTREAM FL 33	3483						
				City		F	Zip Code
. The above named enti	ty submits this statement for	the purpose of changing its	registere	ed office or register	ed agent, or both, in the State of	f Florida.	

9. Capital Contributions as Shown on record.

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.

GENERAL PARTNER INFORMATION

13.

ADDRESS CHANGES ONLY

(NOTE: Registered Agent signature required when reinstating)

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT# NAME	P40345 FARMINGTON REALTY COMPANY, INC.	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	1280 W NEWPORT CENTER DR DEERFIELD BCH. FL	CITY-ST-ZIP	
DOCUMENT# NAME	1	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	·	CITY-ST-ZIP	,
DOCUMENT# NAME	· · · · · · · · · · · · · · · · · · ·	STREET ADORESS	4000032353449
STREET ADORESS CITY-ST-ZIP		CITY-ST-ZIP	4000032353449 -05/02/0001063008 ****141.25 ****141.25
DOCUMENT# NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT# NAME_*		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CTTY-ST-ZIP	
DOCUMENT# NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

14. 1 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 AND TYPER OF PRINTED VALLE OF SIGNING GENERAL PARTNER

[WILLIAM F. RING, JR. V.P.

4-1300

9843607713

Daytime Phone #

CR2E003 (9/99)