


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0017428 AT

DOCUMENT # A33422

1. Entity Name
LEYKAUF GROUP, FLORIDA LTD.



FILED

03 MAY - 1 PM 12:06

Principal Place of Business
**CONGRESS AVENUE
WEST PALM BEACH FL 33409**

Mailing Address
**3321 TOWERWOOD DRIVE
SUITE 113
DALLAS TX 75234-2331**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
17130 Dallas Parkway
Suite, Apt. #, etc.
Suite 240
City & State
Dallas, TX
Zip
75248

Country
USA

DUE BY MAY 1, 2003

4. FEI Number **65-0355705**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MUCCI, MARK S.
% BENSON, MOYLE & CHAMBERS
ONE FINANCIAL PLAZA, SUITE 1602
FORT LAUDERDALE, FL FL 33394**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as Shown on record. **\$735,370.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$760,714.00**

11. **MAKE CHECK PAYABLE TO FL. 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 #	F01000004975	STREET ADDRESS	17130 Dallas Parkway, Suite 240
NAME	W. L. REAL ESTATE, INC.	CITY-ST-ZIP	Dallas, TX 75248
STREET ADDRESS	3321 TOWERWOOD DRIVE, SUITE 113		
CITY-ST-ZIP	DALLAS TX 75234		
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

FF \$526.75

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05/01/03--01024--004 **703.66

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: Andreas Bremer **ANDREAS BREMER, VP OF GP** 4/25/03 972-244-3545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)

STATE OF FLORIDA