2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A33541 1. Entity Name						KEO											
STANFORD STATION PARTNERS, L.P. (LIMITED PARTNES					FILED SECRETARY OF STATE DIVISION OF CORFORATIONS												
Principal Place of Business Mailing Address					00 MAY - I PM 12: 06												
FIVE CONCOURSE PARKWAY FIVE CONCOURSE PARKWAY							i										
SUITE 2000 SUITE 2000 ATLANTA GA 30328 ATLANTA GA 30328-6111						$\overline{}$	1	0(0): B/0:: 0:0:: 4/82! :50!									
2. Principal Place of Business 3. Mailing Addr																	
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE												
City & State City & State					4. FEI Number	58-2008491		Applied For Not Applicable									
Zip	Country	Zip	Cour	ntry	5. Certificate of	of Status Desired		.75 Additional Required									
6. Name and Address of Current Registered Agent		Registered Agent			7. Name and	Address of New Reg	istered Age	nt									
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				Street Address (P.O. Box Number is Not Acceptable)													
													City FL' Zip Code				
									8. The above	named entity submits this statement fo	r the purpose of changing its	register	ed office or regis	tered agent, or both	, in the State of Florid	a.	
CICNATURE					ŕ												
SIGNATURE .	Signature, typed or printed name of registered agent a			ed Agent signature requi	ired when reinstating)	11. MAKE CHECK	DATE	DEDT OF STATE									
Capital Co as Shown or	on record. \$1,423,300.00	10. Amount of Capita in FLORIDA to da	ate. ≰	1,423,50		SEE REVERSE	SIDE FOR F	EE INFORMATION									
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EN	TITY M	IUST BE REGIS	STERED AND AG	CTIVE WITH THIS (OFFICE. eral partne	т.									
12. GENERAL PARTNER INFORMATION					ADDRESS CHANGES ONLY												
DOCUMENT# NAME	EWING, MORRIS M.			EET ADDRESS													
STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZIP			-										
DOCUMENT#	MCAULEY, THOMAS H. 200 GALLERIA PARKWAY, NW SUITE 1400 ATLANTA GA 30339			EET ADDRESS													
NAME STREET ADDRESS CITY - ST - ZIP				/- ST - ZIP	4000032748242 -06/02/0001055017_												
DOCUMENT# :	J11316 RJ EQUITIES, INC.			EET ADDRESS	and the second	****52	2 5.25	****526,25									
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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 equired by Chapter 620, Florida Statutes																	
SIGNAT		JRDGESOUP PRINTED NAME OF SIGNING GENERA	RED AL PARTNE) ER	4	75 00 7	_	5-4406 ne Phone #									
		- J															