## 2002 UNIFORM BUSINESS REPORT (UBR)

STAPLE CHECK HERE

2002 UNIFORM BUSINESS REPORT (UBR)						А	PHKUN	AL)
DOCUMENT # A33574						AND FILED		
SHELTER V GP LIMITED PARTNERSHIP						02 MAR 15 AM 10: 23		
Principal Plant & Principal Pl						SECRETARY OF STATE FAIL AHASSEE, FLORIDA		
Principal Place of Business Mailing Address  SOUTH COLORADO BLVD TWR. 2.				1		TALLA	HASSEL	-, FEORIO
DENVER CO			GREENVILLE SC 29602					
							H <b>aha</b> h <b>aha</b> h ah	RAL BABAR BARAL BABAL BABAL LABA
2. Principal I	Place of Busin	ess	3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.		DUE BY MAY 1, 2002		
City & State			City & State	City & State		4. FEI Number 57-0964159		Applied For Not Applicable
Zip Country		Zip	Zip Cour		5. Certificate of Status Desired		8.75 Additional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent		
CORPORATION SERVICE COMPANY					Name			
1201 HAYS STREET TALLAHASSEE FL 32301-2525					Street Addres	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	ed office or regis	tered agent, or both, in the State of Flor	ida.		
SIGNATURE								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.  9. Capital Contributions 10. Amount of Capital Contribution					hutions	11. MAKE CHECK	DATE PAYABLE	TO DEPT. OF STATE
as Shown on record.   • The state of the sta						SEE REVERS	E SIDE FOR	FEE INFORMATION
A GENERAL PARTNER THAT IS A BUSINESS ENTITY IN NOTE: General Partners MAY NOT be changed on the form					n; an amendm	ent must be filed to change a ge	neral part	ner.
12. DOCUMENT#	GENERAL PARTNER INFORMATION 13.					ADDRESS CHAI	NGES ONLY	′
NAME	SHELTER		ATION OF SOUTH CARO					1
STREET ADDRESS CITY-ST-ZIP	2000 S COLORADO BLVD, TWR. 2, #2-1000 DENVER CO 80222			CITY	-ST-ZIP	5000051702350 -03/26/0201079006		
DOCUMENT <b>#</b> NAME				STRE	EET ADDRESS	****14	1.25	****141.25
STREET ADDRESS CITY-ST-ZIP				ĊITY	-ST-ZIP	- 134	<del></del>	
DOCUMENT # NAME				STRE	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP		<del>,</del>	
DOCUMENT # NAME				STRE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		·-		CITY	-ST-ZIP			
DOCUMENT # NAME				STRE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP			
DOCUMENT A NAME STREET ADDRESS				STRE	ET ADDRESS			
CITY-ST-ZIP	and the second				-ST-ZiP			
indicated the receives Shelter	certify that the on this report ver or trustee e	information supplied wi is true and accurate an impowered to execute t Limited Part	to this filing does not qualify for d that my signature shall have his report as required by Chap netship, by its	the exer the same ter 620, f GP S1	mption stated in S e legal effect as if Florida Statutes helter Re	Section 119.07(3)(i), Florida Statutes. I f made under oath; that I am a General I alty V Corporation	urther certify Partner of th	y that the information le limited partnership or

SIGNATURE: By URE REOCHARASarch, Asst. Secretary 3-12-02 303-757-8101 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #