

2001 UNIFORM BUSINESS REPORT (UBR)

0016903 AF

DOCUMENT # **A93000000377**

1. Entity Name

REALTY OPPORTUNITY INCOME FUND VIII, LTD.

FILED
01 APR 27 PM 3:53
SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

| | |
|--|--|
| Principal Place of Business 7826 COOPER ROAD CINCINNATI OH 45242 | Mailing Address 7826 COOPER ROAD CINCINNATI OH 45242 |
|--|--|

| | |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip | Country |

| | |
|--|---------------------------------------|
| 4. FEI Number 65-0438424 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

MCGRATH, GREGORY
4561 GULF OF MEXICO DR., #101
LONGBOAT KEY FL 34228

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOT Registered Agent signature required when reinstating) DATE

| | | |
|---|---|---|
| 9. Capital Contributions as Shown on record. \$99.00 | 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.

| 12. GENERAL PARTNER INFORMATION | |
|---------------------------------|-------------------------------|
| DOCUMENT # | P95000007305 |
| NAME | BARON CAPITAL IV, INC. |
| STREET ADDRESS | 7826 COOPER ROAD |
| CITY-ST-ZIP | CINCINNATI OH 45242 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| 13. ADDRESS CHANGES ONLY | |
|--------------------------|------------------------------|
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | 400004218704--3 |
| CITY-ST-ZIP | -05/15/01--01140--018 |
| STREET ADDRESS | ***150.00 ***150.00 |
| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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 by me as 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: Gregory K. McGrath
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Gregory K. McGrath
April 25, 2001
(513) 984-5001

CR2E003 (11/00)