

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0009457 AV

DOCUMENT # A93000000935

1. Entity Name
BELLE RIVE FINANCING PARTNERSHIP, LTD.



FILED

03 MAY -2 PM 2:44

SECRETARY OF STATE



Principal Place of Business
% DARYL CRAMER & ASSOC., P.A.
3801 PGA BLVD SUITE 508
PALM BEACH GARDENS FL 33410-2758

Mailing Address
% DARYL CRAMER & ASSOC., P.A.
3801 PGA BLVD SUITE 508
PALM BEACH GARDENS FL 33410-2758

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2003

4. FEI Number 65-0472745

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DARYL CRAMER & ASSOC., P.A.
515 NORTH FLAGLER DRIVE, #910
WEST PALM BEACH FL 33401

Name Daryl Cramer & Associates, P.A.

Street Address (P.O. Box Number is Not Acceptable)

3801 PGA Boulevard

Suite 508

City

Palm Beach Gardens

FL

Zip Code

33410

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

Daryl B. Cramer Pres. 4/12/03

DATE

9. Capital Contributions as Shown on record. \$620,000.00

10. Amount of Capital Contributions \$620,000.00 in FLORIDA to date.

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 # P93000060940
NAME BELLE RIVE GENERAL PARTNER, INC.
STREET ADDRESS 515 NORTH FLAGLER DRIVE, #910
CITY-ST-ZIP WEST PALM BEACH FL 33401

STREET ADDRESS 3801 PGA Boulevard, Suite 508
CITY-ST-ZIP Palm Beach Gardens, FL 33410-2758

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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; 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

Belle Rive General Partner, Inc.

SIGNATURE:

By SIGNATURE REQUIRED

Fabrizio Lucchese 4-08-03 905-882-1212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)