2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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FILED
03 JUL 30 PM 12: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A93000001076

1. Entity Name
FISHERMAN'S WHARF REALTY LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
C/O EMALFARB INVESTMENT CORPORATION LTD. 140 INTRACOASTAL POINTE DRIVE. SUITE 404 JUPITER FL 33477	337 E. INDIANTOWN ROAD STE 8 JUPITER FL 33477-2794

2. Principal Place of Business		3. Mailing Address	
		580 Village Blvd.	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 300	
City & State		City & State West Palm Beach, FL	
Zip	Country	Zip 33409	Country US

DUE BY SEPTEMBER 24, 2003

4. FEI Number 65-0442585 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EMALFARB, MARK A
140 INTRACOASTAL POINTE DRIVE, STE. 404
JUPITER FL 33477

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. $3,725,000.00

10. Amount of Capital Contributions 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 #	P01000025347	STREET ADDRESS	
NAME	FWRLP, INC.		
STREET ADDRESS	140 INTRACOASTAL POINTE DRIVE, SUITE 404	CITY-ST-ZIP	
CITY-ST-ZIP	JUPITER FL 33477		
DOCUMENT #		STREET ADDRESS	400021947574 07/30/03--01065--004 **526.25
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CR2E003 (4/03)

STAPLE CHECK HERE

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: X SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #