## 🍦 2002 UNIFORM BUSINESS REPORT (UBR)

## A93000001179 DOCUMENT # FILED 1. Entity Name 02 APR 29 AM 8: 54 PARKER-RALEIGH DEVELOPMENT XXI, LIMITED PARTNERS SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 201 NORTH FRANKLIN STREET. SUITE 2100 201 NORTH FRANKLIN STREET, SUITE 2100 **TAMPA FL 33602 TAMPA FL 33602** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** City & State City & State Applied For 4. FEI Number 56-1852937 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name e in an including the second EDWARDS, JOSEPH D Street Address (P.O. Box Number is Not Acceptable) 201 NORTH FRANKLIN STREET, SUITE 2100 **TAMPA FL 33602** Citv Zio 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. 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE \$0.00 as Shown on record. in FLORIDA to date. 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 ADDRESS CHANGES ONLY DOCUMENT # P93000078687 STREET ADDRESS PARKER-RALEIGH DEVELOPMENT XXI. INC. STREET ADDRESS 201 NORTH FRANKLIN STREET, SUITE 2100 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** DOCUMENT # STREET ADDRESS NAME <u>000005481940--4</u> STREET ADDRESS -05/07/02--01083--004 CITY-ST-7IP CITY-ST-ZIF \*\*\*\*141.25 \*\*\*\*141. DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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

Parker-Rale-gh Development XXI, Inc.

By: Parker Lincoln Developers, Inc. its Managing Agent

SIGNATURE:

YPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

20/02

CR2E003 (9/01)