2000 UNIFORM	BUSINESS	REPORT	(UBR)
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DOCU 1. Entity Nam		# A9300	0001200)			सम्बद्धाः			08 5
SPRINGBROOK COMMONS, LTD.				DIVISI	RETARY OF STA OH OF COSPORA		,			
Principal Place of Business C/O GATEHOUSE MANAGEMENT 313 CONGRESS ST. BOSTON MA 02210 Mailing Address C/O GATEHOUSE MANAGEMENT 313 CONGRESS ST. BOSTON MA 02210-1218			ST.			EB 22 AM 10:		aid 11611 35 115 6 611)	. S. 1 1	
Principal Place of Business 3. Mailing Address			3				e nii ee nii ee nii i			
Suite, Apt. #, etc. Suite, Apt. #, etc.).			DO NOT WRITE I	N THIS SPAC	E			
City & Stat	e	***	City & State			4. FEI Number	65-0471827		Applied Fo	
Zip		Country	Zip	Cour	ntry		of Status Desired	☐ Fee f	75 Additional Required	
	6. Name	and Address of Current F	Registered Agent			7. Name and	Address of New Regi	stered Agent	1	
			and Superior and		Name			-	_	
	ugh, Bria				Street Addres	s (P.O. Box Number	is Not Acceptable)			
		MILLER WEISSLER ET A	L							\dashv
	FLAGLER	STREET								
MIAMI FL	33130				City			FL 2	lip Code	
8. The above	named entit	y submits this statement for	the purpose of chang	ging its register	ed office or regis	tered agent, or both	, in the State of Florida	3.		
SIGNATURE .	Signature typed	or printed name of registered agent ar	nd title if applicable	(NOTE: Registere	ad Agent signatura requ	ired when reinstating)		DATE		
9. Capital Co as Shown		\$4,334,930.00		of Capital Contri DA to date.	ibutions Sam	e 15#9	11. MAKE CHECK F SEE REVERSE		EPT. OF STATE Information	
	A (GENERAL PARTNER TH	HAT IS A BUSINES	SS ENTITY M	IUST BE REGI	STERED AND A	CTIVE WITH THIS	OFFICE.		
12.	NOTE	GENERAL PARTNER		on the form		ent must be filed	ADDRESS CHANG			\dashv
DOCUMENT#	F9500000		IN ONWATION				ADDITION OF THE	aco onei		— <u>6</u>
NAME STREET ADORESS	GHG SPRINGBROOK, INC. 313 CONGRESS ST.			STREET ADDRESS CITY-ST-ZIP				CR2E003 (9/99)		
CITY-ST-ZIP	BOSTON					mpo	11/00			—
DOCUMENT# NAME STREET ADDRESS	M97000000472 GHG SOUTHEAST INVESTORS LLC SS 313 CONGRESS STREET			EET ADDRESS		000031	5651	2		
CITY-ST-ZIP DOCUMENT#	BOSTON	MA 02210			-		000031! 	0.5 <u>6010</u> 6	7-526.25	
NAME STREET ADDRESS		-			EET ADORESS .					
CITY-ST-ZIP	mage agrap a sayy to a last staring	· · · · · · · · · · · · · · · · · · ·		. CITY	7-ST-ZVP				<u> </u>	
DOCUMENT # NAME STREET ADDRESS				STR	EET ADDRESS					
CITY-ST-ZIP				CITY	(∙ST-20P					
DOCUMENT # NAME	. "			STR	EET ADORESS					
STREET ADDRESS CITY - ST - ZIP				СП	/-ST-ZIP		uit-varye			
DOCUMENT# NAME		<i>K</i>		STR	EET ADORESS					
STREET ADORESS CITY-ST-ZIP					/-ST-ZEP					
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 elecute this regort as required by Chapter 620, Florida Statutes									ip or	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER 1-11-00 (611) 345-9306 Date Daytome Phone #									_	
THE THE SHEET STATE OF THE STAT										