

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000000016

1. Entity Name

GROSVENOR PARK II LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 14 PM 1:33

Principal Place of Business

2401 PGA BLVD.

SUITE 280

PALM BCH. GARDENS FL 33410

Mailing Address

2401 PGA BLVD.

SUITE 280

PALM BCH. GARDENS FL 33410-3516



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HAMILTON, THOMAS

2401 PGA BLVD.

SUITE 280

PALM BCH. GARDENS FL 33410

7. Name and Address of New Registered Agent

Name

~~David J. Wiener, Esq.~~ David J. Wiener, Esq.

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

2401 PGA Boulevard

Suite 280

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$10.00

10. Amount of Capital Contributions
in FLORIDA to date

\$10.00

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 # P34894
NAME HALMISH MANAGEMENT CORPORATION
STREET ADDRESS 2401 PGA BLVD. STE. 280
CITY - ST - ZIP PALM BCH. GARDENS FL 33410

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

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; 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:

Tom Hamilton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Tom Hamilton, President

April 25, 2000

(561) 694-9270

Date

Daytime Phone #