## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCU	MENT	# Δ0/00	<u> </u>	การร								
DOCUMENT # A9400001638  1. Entity Name								FILED SECRETARY OF STATE DIVISION OF CORPORATIONS				
DE LA PARTE PARTNERSHIP, LTD.								1				
Principal Place of Business  3435 BAYSHORE BLVD #1700  TAMPA FL 33629  TAMPA FL 33629									00 APR 28	A		1811 ( <b>28</b> 1
Principal Place of Business     3. Mailing Address						_						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				-	DO NOT WR	ITE IN THIS SI	PACE			
City & State City & State								4. FEI Number			Applied	d For
Zip Country			Zip Count			ntry	5 Cortificate of Status Desired S8.75 A			Not Ap 8.75 Addition	plicable	
6. Name and Address of Current			Registered Agent			Τ	7. Name and Address of New Registered Agent					
	-					Name						
DE LA PARTE, L. DAVID 3435 BAYSHORE BLVD., #1700						Street Address (P.O. Box Number is Not Acceptable)						
TAMPA FL 33629												
						City				FL_	Zip Code	
8. The above	named entit	y submits this statement for	the p	urpose of changing its	register	ed office or	register	ed agent, or both	, in the State of Fl	orida.		
SIGNATURE .	Signature, typed	or printed name of registered agent a	ınd tıtle i	f applicable. (NOTE	E: Registere	d Agent signati	ure required	when reinstating)		DATE		_
9. Capital Contributions as Shown on record. \$5,000,000.00 in FLORIDA to date						butions					TO DEPT. OF STA	
	A (	GENERAL PARTNER T General Partners MA	HAT I	S A BUSINESS EN	TITY M	UST BE I	REGIST	TERED AND AC	TIVE WITH TH	IIS OFFICE. eneral parti	ner.	
12.		GENERAL PARTNER			13.		-		ADDRESS CH			
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	DE LA PARTE, LOUIS A JR. 3435 BAYSHORE BLVD., #1700 TAMPA FL 33629					EET ADDRESS - ST - ZIP		80	<b><u> </u></b>	<b>27-25</b> 26.25	088 <mark>8012</mark> ****526	25
DOCUMENT#	I IAMPA F	_ 33029			STR	EET ADDRESS			<del>-</del>		<del></del>	
NAME STREET ADORESS CITY - ST - ZIP	DE LA PARTE, HELEN W 3435 BAYSHORE BLVD., #1700 TAMPA FL 33629					-ST-ZIP			FV			
DOCUMENT / ,	DE LA PARTE, L. DAVID					EET ADDRESS	101	E. KENNE	DY BLVD.,	SUITE	3400	-
STREET ADDRESS CITY - ST - ZIP	201 NORTH FRANKLIN STREET, SUITE 2300 TAMPA FL 33602					-ST-ZIP	TAM	IPA, FL 3	3602		_	
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STREET ADDRESS CITY - ST - ZIP						-ST-ZIP				,		
indicated	l on this repor	e information supplied with t is true and accurate and empowered to execute this	that m	v signature shall have :	the sam	e legal effe	ct as if m	nade under oath;	that I am a Gener	I further certical Partner of to	fy that the information the limited partners	nation ership or
SIGNAT	URE: _	SIGNATURE AND TYPED OR	PRINTE	D NAME OF SIGNING GENERA	AL PARTNE	IX.		4.0	22.00 Date	( <b>8</b> )	13)83/- rtime Phone #	1967
	•	HELEN I	U-	dela PAS	RYE			···				