2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9500000788 1. Entity Name STERLING OXFORD LIMITED PARTNERSHIP					FILED 03 APR 25 PH 4: 40 SECRETARY OF STATE TALLAHASSEE FLORIDA MJ		AV
Principal Place of Business ONE N. CLEMATIS ST., STE. 305 WEST PALM BEACH FL 33401 Mailing Address ONE N. CLEMATIS ST WEST PALM BEACH I			,				•
2. Principal Place of Business		3. Mailing Address			4 20		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003		
City & State		City & State			4. FEI Number 65-0582398	Applied For Not Applicable	
Zip Country		Zip	Cour	ntry	5. Certificate of Status Desired Fe	8.75 Additional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
KOSOY, A. DAVID				Name			
ONE N. CLEMATIS ST., STE. 305				Street Address (P.O. Box Number is Not Acceptable)			
WEST PALM BEACH FL 33401							
				City FL Zip Code			
	named entity submits this statement folions of registered agent.	or the purpose of changing	j its register	ed office or register	ed agent, or both, in the State of Florida. I am far	niliar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.			DATE		
9. Capital Contributions as Shown on record. \$455,400.00 10. Amount of Capital Cin FLORIDA to date				ontributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
					TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partn	or	
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY			
DOCUMENT # NAME	P95000036721 STERLING IV FLORIDA, INC.	STF		EET ADDRESS			CR2E003 (10/02)
STREET ADDRESS CITY-ST-ZIP	ONE N. CLEMATIS ST., STE. 305 WEST PALM BEACH FL 33401		CITY	r-ST-ZIP			
DOCUMENT # NAME			STR	EET ADDRESS		13***	8
STREET ADDRESS CITY-ST-ZIP			СПУ	r-ST-ZIP	04/25/0301046008 **\$35.00		
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STREET ADDRESS CITY-ST-ZIP				-ST-ZIP			
14. I hereby o	certify that the information supplied with	this filing does not qualify	for the exe	mption stated in Se	ction 119.07(3)(i), Florida Statutes. I further certify	that the information	

SIGNATURE:

STAPLE UPECS HERE

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

Sterkling IV Florida Tave

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