

2000 UNIFORM BUSINESS REPORT (UBR)

0001231 A

DOCUMENT # A95000000830

1. Entity Name

GROSVENOR PARTNERS, LTD.

FILED

00 MAR -8 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
4750 NE 23RD AVENUE
FT. LAUDERDALE FL 33308

Mailing Address
4750 NE 23RD AVENUE
FT. LAUDERDALE FL 33308-4721

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0389292

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROGAN, FRANCIS B JR.
515 E. LAS OLAS BLVD., SUITE 1500
FT. LAUDERDALE FL 33301

Name

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

City

FL

Zip 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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$28,276,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # GP9600000513
NAME MAYFAIR VENTURES, G.P.
STREET ADDRESS 6550 NORTH FEDERAL HIGHWAY, SUITE 240
CITY - ST - ZIP FORT LAUDERDALE FL 33308

STREET ADDRESS 40 FRANK J. AVELLINO
4750 NE 23RD AVENUE
CITY - ST - ZIP FORT LAUDERDALE, FL 33308-4721

DOCUMENT #
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CITY - ST - ZIP

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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: *Francis B. Brogan* **SIGNATURE REQUIRED** Avelino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/2/00
Date

954-776-7141
Daytime Phone #

CR2E003 (9/96)