2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # A95000001497 May 02, 2000 8:00 am Secretary of State 1. Entity Name WILTON/MGA INVESTORS, LTD., A FLORIDA LIMITED PA Principal Place of Business Mailing Address 11022 SANTA MONICA BLVD., STE. 450 11022 SANTA MONICA BLVD., STE. 450 LOS ANGELES CA 90025 LOS ANGELES CA 90025-7513 3. Mailing Address 2. Principal Place of Business <u>11111 Santa Monica Blvd</u> <u>11111 Santa Monica Blvd</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 500 Suite 500 City & State 4. FEI Number Applied For City & State 95-4548971 Not Applicable Los Angeles, CA Los Angeles, Country _ Country \$8.75 Additional 5. Certificate of Status Desired 90025 USA 90025 USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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) 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions 10. Amount of Capital Contributions \$1,000,00 -0-SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. in FLORIDA to date. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. (i) 'y' i) DOCUMENT # P95000076287 STREET ADDRESS 11111 Santa Monica Blvd., Suite 500 WILTON EAST COAST PARTNERS, INC. NAME 9 11022 SANTA MONICA BLVD., STE. 450 STREET ADDRESS CITY-ST-ZIP Los Angeles, CA 90025 LOS ANGELES CA 90025 CITY-ST-7P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF -06/09/00--01109--019 DOCUMENT # STREET ADDRESS ****141.25 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS COY-ST-76 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIF DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIF 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

Jay H. Wilton, President

MATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/20/00

(310) 444-6377

Daytime Phone #