


2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0001336 AT

DOCUMENT # A96000000637

1. Entity Name
CROSS CREEK CENTRE ASSOCIATES, LTD.



FILED

2003 SEP 18 AM 12:01

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



Principal Place of Business
**337 EAST INDIANTOWN ROAD, SUITE 8
JUPITER FL 33477**

Mailing Address
**337 EAST INDIANTOWN ROAD, SUITE 8
JUPITER FL 33477**

2. Principal Place of Business
580 Village Blvd

3. Mailing Address
580 Village Blvd

Suite, Apt. #, etc.
Suite 300

Suite, Apt. #, etc.
Suite 300

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip Country
33409-1953 Palm Beach

Zip Country
33409-1953 Palm Beach

DUE BY SEPTEMBER 24, 2003

4. FEI Number **65-0650537**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GERSON, GARY N
1645 PALM BEACH LAKES BLVD., SUITE 1200
WEST-PALM BEACH FL 33401

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as Shown on record. **\$1,100,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. 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 #	P96000028655	STREET ADDRESS	300022460123
NAME	CCAGP, INC.	CITY-ST-ZIP	08/20/03--01010--024 **50.00
STREET ADDRESS	337 EAST INDIANTOWN ROAD, SUITE 8	STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL 33477	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	300022460123
CITY-ST-ZIP		CITY-ST-ZIP	09/29/03--01029--009 **476.25
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: Steven J. Denholtz 2/15/04 (732) 388-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (4/03)