## 2002 UNIFORM BUSINESS REPORT (UBR) A96000000726 DOCUMENT # FILED 1. Entity Name GWD WEST PALM III, LTD. 02 MAY -3 PM 3: 29 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 701 BRICKELL AVE., S. 3000 9055 IBIS BOULEVARD MIAMI FL 33131 **%CONTROLLER** WEST PALM BEACH FL 33412 2. Principal Place of Business 3. Mailing Address 9055 Ibi<u>s Blvd</u> Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** City & State City & State 4. FEI Number Applied For West Palm Beach Florida 65-0718021 Not Applicable <sup>Ζίρ</sup>33412 Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent -7. Name and Address of New Registered Agent Name INTRASTATE REGISTERED AGENT CORPORATION George G. Speer Street Address (P.O. Box Number is Not Acceptable) George G 701 BRICKELL AVE., S. 3000 9055 Ibis Blvd **MIAMI FL 33131** City Zip Code West Palm Beach 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 George G. Speer, CFO or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions \$1,000.00 11. MAKE CHECK PAYABLE TO DEPT. OF STATE as Shown on record. in FLORIDA to date. 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 ADDRESS CHANGES ONLY DOCUMENT'# P96000032706 STREET ADDRESS NAME GWD WEST PALM III, INC. STREET ADDRESS 9055 IBIS BOULEVARD CITY-ST-ZIP WEST PALM BEACH FL 33412 CITY-ST-ZIP DOCUMENT # STREET ADDRESS <u>00000561003</u>8 STREET ADDRESS -05/24/02--01037--029 CITY-ST-7IP CITY-ST-ZIP **DOCUMENT #** STREET ADDRESS NAME STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP -DOCUMENT # 6 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT #** STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP 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

Speer

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING GENERAL PARTNER

04/29/02

SIGNATURE: