


**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

<b>LIMITED PARTNERSHIP ANNUAL REPORT 1999</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>	
<b>1. Name of Limited Partnership</b>  UNIVERSITY I ASSOCIATES, LTD.		<b>1a. DOCUMENT #</b> <b>A96000001554</b>	

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 DEC -7 PM 3:41



<b>Mailing Address</b> 95 SOUTH FEDERAL HIGHWAY, SUITE 200 BOCA RATON FL 33432		<b>Principal Office Address</b> 95 SOUTH FEDERAL HIGHWAY, SUITE 200 BOCA RATON FL 33432		<b>3. Date Formed or Registered</b> 08/21/1996	<b>5a. Capital Contributions as Shown on record.</b> \$6,615,000.00
				<b>3a. Date of Last Report</b> 09/22/1997	<b>5b. Amount of Capital Contributions in FLORIDA to date:</b>
				<b>4. State or Country of Formation</b> FL	
<b>2. Mailing Address</b> 95 So. FEDERAL Hwy Suite, Apt #, etc. #205 Boca RATON FL Zip 33432		<b>2a. Principal Office Address</b> 95 So. FEDERAL Hwy Suite, Apt #, etc. #205 Boca RATON FL Zip 33432		<b>6. FEI Number</b> 65-0699917	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
				<b>7. Certificate of Status Desired</b>	<input type="checkbox"/> \$8.75 Additional Fee Required
<b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b>					

<b>9. Name and Address of Current Registered Agent</b> SONGY, DAVID D 95 SOUTH FEDERAL HIGHWAY, SUITE 200 BOCA RATON FL 33432		<b>10. If changed, new Registered Agent/Office</b>	
		Name Street Address (P.O. Box Number is Not Acceptable) 95 So. FEDERAL HIGHWAY Suite, Apt. #, etc. #205 City Boca RATON FL USA Zip Code 33432	

**10a.** Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

<b>11. Name(s) of General Partner(s)</b> FLORIDA OFFICE CORP. SONGY PARTNERS LIMITED	<b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b> ONE CHASE MANHATTAN P 95 SOUTH FEDERAL HIGH	<b>11b. City, State &amp; Zip Code</b> NEW YORK NY 10025 BOCA RATON FL 33432	<b>11c. Registration/Document Number</b> F96000003355 A33386
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**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

**12.** I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

12/2/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/86)