_	2003 LIMITED	PARTNER	(5MIP 57 (1188	) <b>1</b>		
DOCUMENT # A9600001875  1. Entity Name N. H. GREENE PROPERTIES, LTD.					FIL ED	
				*** T. S.	03 FEB -7 AM 9: 32	
Principal Place of Business 19061 N.E. 3RD COURT MIAMI FL 33179		Mailing Address 1908t N.E. 3RD COURT MIAMI FL 33179		SECRETARY OF STAIL TALEAHASSEE, FLORIDA		
Principal Place of Business     3. Mailing Add			ress		-	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	a, Apt. #, etc.		DUE BY MAY 1, 2003	
City & State	e	City & State		4. FEI Number 65-0702200 Applied For Not Applicable		
Zip	Country	Zip	Country		5. Certificate of Status Desired	
	مُصِينَا مُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ الْمُعَالِمُ	t Registered Agent	<del></del>	7. Name and Address of New Registered Agent		
6. Name and Address of Current Registered Agent			Nam	Name		
NEW-LEN SPECIALTY CO., INC. 19081 N.E. 3RD COURT			Stree	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33179				·		
			City		FL Zip Code	
8. The above	e named entity submits this statement tions of registered agent.	for the purpose of changin	g its registered offic	e or registe	ered agent, or both, in the State of Florida. I am	familiar with, and accept
_					DATE	
9. Capital Co	Signature, typed or printed name of registered age		TO FL. DEPT. OF STATE			
	on record.		Capital Contributions to date /, 294		TEDED AND ACTIVE WITH THIS OFFICI	 E.
NOTE: General Partners MAY NOT be changed on the			on the form, and	ADDRESS CHANGES ONLY		
12.		IER INFORMATION	13.		ADDITION OF THE PERSON	
DOCUMENT # NAME .	203450 NEW-LEN SPECIALTY CO., INC.		STREET ADDR	STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	19081 N.E. 3RD COURT MIAMI FL 33179	·	CITY-ST-ZIP	**5-2P* 300011979683 ***526.25		83 **526.25
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STREET ADDRESS			CITY-ST-ZIP			<del></del>
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STREET ADDRESS			CITY-ST-ZIF	,		
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NAME STREET ADDRES CITY-ST-ZIP			CITY-ST-ZIF	CITY-ST-ZIP		, 
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STREET ADDRES	ss		CITY-ST-ZII	۰		
DOCUMENT #			STREET ADD	DRESS		
DOCUMENT # NAME STREET ADDRESS			CITY-ST-ZI	P -	M TH	OMAS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

X 02/4/03

(305)651-5237