2001 UNIFORM BUSINESS REPORT (UBR)					
DOCUMENT # A9600002346				0015274 7774 AF	
IS II GEORGETOWN ASSOCIATES, LTD.			FILED		
Principal Place of Business Mailing Address			·····	01 MAR 15 PN 12:00	
C/O BASIC CAPITAL MANAGEMENT. INC. 10607 N CENTRAL EXPRESSWAY. SUITE 600 DALLAS TX 75231 C/O BASIC CAPITAL MANAGEMENT. INC. 10607 N CENTRAL EXPRESS DALLAS TX 75231 C/O BASIC CAPITAL MANAGEMENT. INC. 10607 N CENTRAL EXPRESS DALLAS TX 75231				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Place of Business 3. Mailing Address 1800 Valley View Lane 1800 Valley V Suite, Apt. #, etc. Suite, Apt. #, etc.		liew	Lane	LIBERTI IN THE SUIT OF THE SUIT OF THE SPACE	
City & State Dallas, TX Dallas, TX				4. FEI Number 75-2682170 Applied For Not Applicable	
Zip75234 CountryDallas	^{Zip} 75234	Count	^{ry} Dallas	5. Certificate of Status Desired Status Desir	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM				P.O. Box Number is Not Acceptable)	
1200 SOUTH PINE ISLAND ROAD		Street Address (
PLANTATION FL 33324			City		
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					
9. Capital Contributions as Shown on record. \$990.00					
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 / F98000002302 NAME ART GEORGETOWN, INC. STREET ADDRESS 10670 N CENTRAL EXPRESSWAY, SUITE 600 CITY-ST-ZIP DALLAS TX 75231		STRE	ET ADDRESS	1800 Valley View	
		CITY-	-ST-ZIP	Dallas, TX 75234	
DOCUMENT #		STRE	ET ADDRESS	Dallas, TX 75234	
STREET ADDRESS CITY - ST- ZIP			ST-ZIP	0000038883609	
NAME		STRE	ET ADDRESS	****141:25 *****141.25 **	
STREET ADDRESS CITY-ST-ZIP		CITY-	ST-ZIP		
DOCUMENT #		STRE	ET ADDRESS		
STREET ADDRESS CITY - ST-ZIP		CITY	ST-ZIP		
DOCUMENT # NAME		STRE	ET ADDRESS	· ·	
EET ADDRESS (- ST- ZIP		CITY-	ST-ZIP		
DOCUMENT # NAME		STRE	et 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 Robert A. Waldman, Secretary					
SIGNATURE:					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Dayling Phone #					