2001	UNIFORM	BUSINESS	REPC'RT	(UBR
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				(ODN)					
DOCUMENT # A97Q000000311									
1. Entity Name					FILED				
Mar Lago Village Associates, Ltd.					01 MAY -4 PM 5: 01				
600 Corporate Drive ± 600 Corpor Suite 512 Suite 512		C/O James F. A 600 Corporate	ate Drive		SECRETARY OF STATE TALLAHASSEE. FLORIDA				
Principal Place of Business 201 Saint Cloud Village Ct. Suite, Apt. #, etc. 3. Mailing Address 201 Saint Cloud Suite, Apt. #, etc. Suite, Apt. #, etc.		ud Village Ct.		DO NOT WRITE IN THIS SPACE	MJH				
					014				
City & State St. Cloud, Fl		St. Cloud, Fl			4. FE Number 65-0765216	Applied For Not Applicable			
Zip Country		Zip 34744	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current I			None	7. Name and Address of New Registered Agent				
	ı, David ∵ams, Anton, Et∴Al			Name					
2021 Ty	ler Street			Street Address (I	P.O. Box Number is Not Acceptable)				
Hollywo	ood, Fl 33020				,				
				City FL Zip Code		p Code 			
8. The above	e named entity submits this statement for	the purpose of changing its	egister	ed office or registere	ed agent, or both, in the State of Florida.				
SIGNATURE	5 gnature, typed or printed name of registered agent ar	nd title if applicable (NOTE	170000000	d Agent signature required					
9.1Capital Co	ontributions	10. Amount of Capita	Contrib	outions	11. MAKE CHECK PAYABLE TO DE	PT. OF STATE			
as Shown on record. 2,770,286.00 in FLORIDA to de e. 3,094,277.00 SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.									
-10	NOTE: General Partners MA	Y NOT be changed on th	⊴ form	; an amendment	must be filed to change a general partner.				
DOCUMENT #	GENERAL PARTNER P96000008268	INFORMATION	13.		ADDRESS CHANGES ONLY	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS	Mar Lago G.P., Inc.		SIRE	ET ADDRESS 20:	l Saint Cloud Village Court				
CITY-ST-ZIP	Ft. Lauderdale, Fl		CITY-	St.	. Cloud, F1 34744				
DOCUMENT # NAME			STRE	et address	8000043145 -05/24/01010	78U 15020			
STREET ADDRESS			CITY-	·ST-ZIP		***525.25			
DOCUMENT #	,	· · · · · · · · · · · · · · · · · · ·	-		\$000 Std & A				
NAME STREET ADDRESS			STREI	ET ADDRESS					
CITY-ST-ZIP			CITY-	ST-ZIP	PF \$506.0	5			
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CITY-ST-ZIP DOCUMENT		A	-	<u> </u>					
NAME STREET ADDRESS			STREE	T ADDRESS !					
CITY-ST-ZIP			CITY-	ST-ZIP					
DOCUMENT # NAME			STREE	T 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 Chapte 620, Florida Statutes Mar Lago Village Associates, Ltd. By: Mar Lago G.P., Inc.									
SIGNATURE: General Partner SIGNATURE: Date Daytime Phone #									