

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000001328**

1. Entity Name
JACKSON TOWER EAST LIMITED PARTNERSHIP



Principal Place of Business
**201 BIRCH STREET
FORT LAUDERDALE FL 33301**

Mailing Address
**1000 RIDGEWAY LOOP RD.
SUITE 320
MEMPHIS TN 38120**

APPROVED
AND
FILED

03 JAN 21 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



| | | | | | |
|--------------------------------|---------|---------------------|---------|---|---------------------------------------|
| 2. Principal Place of Business | | 3. Mailing Address | | DUE BY MAY 1, 2003 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 4. FEI Number 65-0769997 | Applied For Not Applicable |
| | | | | 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

| | | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| HEART, W. CHRISTOPHER 151 REGIONS WAY, SUITE 6-A DESTIN FL 32541 | | Name | |
| | | Street Address (P.O. Box Number is Not Acceptable) | |
| | | City | |
| | | FL Zip Code | |

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

| | | |
|--|--|--|
| 9. Capital Contributions as Shown on record. \$6,111,000.00 | 10. Amount of Capital Contributions in FLORIDA to date. 1000.00 | 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 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 | | 13. ADDRESS CHANGES ONLY | |
|---------------------------------|-------------------------------------|--------------------------|--|
| DOCUMENT # | P96000076808 | STREET ADDRESS | |
| NAME | GREG JACKSON MANAGEMENT CO., INC. | CITY-ST-ZIP | |
| STREET ADDRESS | 601 SOUTH ANDREWS AVENUE, SUITE 201 | | |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33301 | | |
| DOCUMENT # | L99000005713 | STREET ADDRESS | |
| NAME | J.J.D. TOWER, L.L.C. | CITY-ST-ZIP | |
| STREET ADDRESS | 2400 EAST LAS OLAS BLVD. | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33301 | | |
| DOCUMENT # | P97000108183 | STREET ADDRESS | |
| NAME | MANAGERS AT SUNRISE, INC. | CITY-ST-ZIP | |
| STREET ADDRESS | 1000 RIDGEWAY LOOP ROAD, SUITE 320 | | |
| CITY-ST-ZIP | MEMPHIS TN 38120 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
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| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| 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.

SIGNATURE: **SK: BATOR KOREQUER** *[Signature]* 1/13/03 901-681-5181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

0019667
MB

CR2E003 (10/02)