## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** OCUMENT # **A** 97000001788 May 02, 2000 8:00 am Secretary of State **Entity Name** West City Peachtree, Ltd. Mailing Address --ipal Place of Business West City Peachtree, Ltd. West City Peachtree, Ltd. c/o Careÿ Kramer Company 1840 N. Commerce Pkwy. 3265 Meridian Pkwy., Ste. 100 Suite 3 . : \_\_\_ : : 2:::: ---Ft. Lauderdale, FL 33331 Weston, FL 33326 3. Mailing Address Principal Place of Business 1840 N. Commerce Pkwy. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite 3 4. FEI Number Applied For City & State City & State 65-0774907 Weston, FL Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 33326 <u>USA</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jane A Houk Albert G. Rex, c/o Carey Kramer Company c/o White & Case Street Address (P.O. Box Number is Not Acceptable) 1840 N. Commerce Pkwy. 200 s. Biscayne Blvd., Suite 4900 Miami, FL 33131 Suite 3 Weston 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. Albert G. Rex .MATUĒĒ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. 683,100.00 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 13. CR2E003 (9/99) P97000068879 STREET ADDRESS 1840 N. Commerce Pkwy,, Ste. 3 West City Peachtree, Inc. 3265 Meridian Pkwy., Ste. Ft. Lauderdale, FL 33331 CITY - ST - ZIP Weston, FL 33326 ST - ZP STREET ADDRESS CITY-ST-ZIP ST-ZP STREET ADDRESS \*\*\*\*526.25 CITY-ST-ZIP 57.70 STREET ADDRESS CITY-ST-ZIP 57 20 STREET ADDRESS CITY - ST - ZIP STREET ADDRESS CITY - ST - ZIP ST-ZP 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 4/28/00 Albert G. Rex SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER