2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9700001944 1. Entity Name					SECRETARY OF STATE DIVISION OF CORPORATIONS	
BUCHANAN BAY PARTNERS, LTD.						
	<u> </u>				00 MAR 20 PM 5: 06	
Principal Place of Business 2105 PARK AVENUE. NORTH 390 NORTH ORANGE AVE WINTER PARK FL 32789 ORLANDO FL 32801-1641				1100	95 TAIL 20 PA 5: 06	
2. Principal Place of Business 3. Mailing Address					T (CENSEN CENE NEWN LEBRY BRITT EGNY BRITT GENY GRIFT MOTO CRIX GODI BEAL	. (281
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number 59-3475114 Applied F. Not Applied	cable
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Currer	nt Registered Agent	· · · · ·	Name	7. Name and Address of New Registered Agent	\dashv
B&C COR	PORATE SERVICES OF CENTRA	AL FL. INC.				
390 NORTH ORANGE AVENUE, SUITE 1100				Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32801						
				City FL Zip Code		
SIGNATURE .	Signature, typed or printed name of registered age	nt and little if applicable. (N	OTE: Registere	d Agent signature requi	stered agent, or both, in the State of Florida. DATE DATE	-
9. Capital Co as Shown	on record.	10. Amount of Cap in FLORIDA to	date.		11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION	- 1
	A GENERAL PARTNER NOTE: General Partners N	THAT IS A BUSINESS E	NTITY M	UST BE REGI	ISTERED AND ACTIVE WITH THIS OFFICE. nent must be filed to change a general partner.	ļ
12.	GENERAL PARTN	ER INFORMATION	13.		ADDRESS CHANGES ONLY	\Box
DOCUMENT#	P9700070756 BUCHANAN BAY, INC.			REET ADDRESS		ļ
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indicatéd	certify that the information supplied w on this report is true and accurate ar ver or trustee_empowered to execute	nd that my signature shall hav	ve the same	e legal effect as i	n Section 119.07(3)(i), Florida Statules. I further certify that the informat if made under oath; that I am a General Partner of the limited partners	tion ship or