2001 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # A9700001976 V | | | | - A |) | |
|---|---|--|-------------|--|--|-------------------|
| NW OREGON, LTD. 🗸 | | | | FILED | | |
| Principal Place of Business Mailing Address | | | | / | 01 FEB 27 AM IC 39 | |
| 600 EAST COLONIAL DRIVE. SUITE 100 √ 600 EAST COLONIAL DRIVE. ORLANDO FL 32803 ORLANDO FL 32803 | | | e. Suite | E 100 🗸 · | SECRETARY OF STATE | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | 1 1001 |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | |
| City & State | | City & State | | | 4. FEI Number 59-3466894 Applied Not App | licable |
| Zip Country | | Zip | Zip Country | | 5. Certificate of Status Desired Search Sear | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent Name | | |
| SCHRIMSHER, J. STEVEN 600 EAST COLONIAL DRIVE, SUITE 100 | | | 1 | Street Address (P.O. Box Number is Not Acceptable) | | |
| ORLANDO FL 32803 | | | | | | |
| | | | | City | FL Zip Code | |
| 8. The above | named entity submits this statement fo | r the purpose of changing its i | register | ed office or registe | ered agent, or both, in the State of Florida. | |
| SIGNATURE . | Signature, typed or printed name of registered agent | and title if applicable. (NOTE | : Registere | ed Agent signature require | ad when reinstating) DATE | |
| 9. Capital Co as Shown | on record. | | te. 3 | ,450, <u>000</u> | | |
| | A GENERAL PARTNER T | HAT IS A BUSINESS ENT | FITY M | IUST BE REGIS | TERED AND ACTIVE WITH THIS OFFICE. nt must be filed to change a general partner. | |
| 12. | GENERAL PARTNER | | 13. | | ADDRESS CHANGES ONLY | |
| DOCUMENT # | P94000031988 V | | | EET ADDRESS . | | 1 |
| NAME STREET ADDRESS CITY-ST-ZIP | RIFE PROPERTIES, INC. 427 SOUTH NEW YORK AVENUE WINTER PARK FL 32789 | | СПУ | r-ST-ZIP | • | |
| DOCUMENT # P96000086295 V NAME SCHRIMSHER INVESTMENTS CORPORATION STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32803 | | | STR | EET ADDRESS | 700003802277 | 1 |
| | | | CITY | Y-ST-ZIP | -03/06/0101063004 ****526.25 ****526.2 | <u>:5</u> |
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| DOCUMENT # NAME | | | STR | EET ADDRESS | | |
| STREET ADDRESS CITY-ST-ZIP | | | | Y-ST-ZIP | | |
| 14. I hereby | certify that the information supplied with l on this report is true and accurate and | this filing does not qualify for that my signature shall have t | the exe | emption stated in S le legal effect as if | Section 119.07(3)(i), Florida Statutes. I further certify that the inform made under oath; that I am a General Partner of the limited partne | ation rship or |