

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A97000002291

1. Entity Name
THE CRACCHIOLO GROUP LIMITED PARTNERSHIP

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

00 APR 27 AM 3:05

Principal Place of Business
 2915 S. CONGRESS AVE., BAY H
 DELRAY BEACH FL 33445

Mailing Address
 2915 S. CONGRESS AVE., BAY H
 DELRAY BEACH FL 33445-7338



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-1710815		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
CRACCHIOLO, JOHN E 2915 S. CONGRESS AVE., SUITE H DELRAY BEACH FL 33445				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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. \$1,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 # NAME STREET ADDRESS CITY - ST - ZIP	F97000005546 CHESTERFIELD PARK CORPORATION 2915 S. CONGRESS AVE.#H,ATTN:JE CRACCHIOLO DELRAY BEACH FL 33445	STREET ADDRESS	
		CITY - ST - ZIP	
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DOCUMENT # NAME STREET ADDRESS 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: *[Signature]* **DATE:** 4-18-00 (561) 243-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 JOHN E. CRACCHIOLO, SEC/TREAS. CHESTERFIELD PARK CORP.
Date Daytime Phone #

CR2E(C) (1/97)