2002	UNIFORM	<b>BUSINESS</b>	<b>REPORT</b>	(UBR)
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DOCUI 1. Entity Nam COLLIEF			)00 غير	02407		<del>≈~</del>	DIVISION	ARY OF STAT F-CORPORAT	ENS.	
Principal Place of Business Mailing Address 3003 TAMIAMI TRAIL NORTH. SUITE 400 3003 TAMIAMI TRAI NAPLES FL 34103 NAPLES FL 34103				03 TAMIAMI TRAIL NO	rth, sui	ITE 400		28 AM 8:		
Principal Place of Business     3. Mailing Address			Mailing Address				19 <b>5</b>	H <b>14</b> 00 <b>(10</b> 00 <b>(10</b> 0	18 ANN 818N 88NN 188N 188N	
Suite, Apt. #, etc.			s	Suite, Apt. #, etc.			DUE BY MAY 1, 2002			
City & State	э	· =	10	City & State		4. FEI Number 59-3481739 Applied For Not Applied For			Applied For Not Applicable	
Zip		Country	Ž	ip	Cour	ntry	5. Certificate of	Status Desired		8.75 Additional
	6,Name	and Address of Current	Regist	ered Agent ——		Nome	7. Name and A	ddress of New Re	egistered Ag	ent
CORROR	ATION SED	/ICE COMPANY				Name, John				
	'S STREET	NOL COMPANY					(P.O. Box Number	is Not Acceptable	)	
	SSEE FL 32	301-2525					400			
	•					City			FL	Zip Code 34103
6 The chave		submits this statement for		venera of changing its	rogietor	API		in the State of Flo		39105
o. The above		Submiss this statement to	ii tiie pi	arpose or changing its	register	ed office or regist	ered agent, or both,	in the state of tho	iua.	
SIGNATURE .	Signatura typed	n printed name of registered agent	and title if	anniica hia					DATE	
9. Capital Contributions as Shown on record.  \$75,000,000.00  10. Amount of Capital in FLORIDA to date in FLORIDA to date.					butions			K PAYABLE T	O DEPT. OF STATE FEE INFORMATION	
		ENERAL PARTNER 1 General Partners MA								ner.
12.	NOTE.	GENERAL PARTNER			13.		mit must be med	ADDRESS CHA		
DOCUMENT # NAME				STRI	EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	3003 TAM NAPLES F	iami trail north, si 'l 34103	UITE 4	00	CITY	r-ST-ZIP				
DOCUMENT # NAME					STR	EET ADDRESS				
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DOCUMENT # NAME				-	STRI	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP						/-ST-ZIP	*			•
14. I hereby of indicated	ertify that the on this repor	information supplied with tis true and accurate and	this fili that my	ng does not qualify fo y signature shall have	the exe	emption stated in S e legal effect as if	Section 119.07(3)(i), made under oath; t	Florida Statutes. I nat I am a General	further certify Partner of th	that the information e limited partnership or

hapter 620, Florida Statutes

Thomas J. Flood 4/16/02

Warner Pres, of Collier Turnstants Turn 941-261-4455

NERAL PARTNER

Date

Despite Phone #