2002 UNIFORM BUSINESS REPORT (UBR) FILED A97000002466 DOCUMENT # 1. Entity Name 02 FEB 15 AM 11: 28 PALMS EAST PARTNERS, LTD. SECRETARY OF STATE Principal Place of Business Mailing Address C/O DAVID C. STRONG 1201 SOUTH ORLANDO AVENUE. SUITE 360 WINTER PARK FL 32789 P.O. BOX 276 WINTER PARK FL 32790 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** City & State 4. FEI Number Applied For City & State 59-3477787 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STRONG, DAVID C Street Address (P.O. Box Number is Not Acceptable) 1201 SOUTH ORLANDO AVENUE, SUITE 360 WINTER PARK FL 32789 Zip Code City FL 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 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION 9. Capital Contributions \$599.00 in FLORIDA to date. as Shown on record. 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 12. CR2E003 (9/01) P98000008553 DOCHMENT # STREET ADDRESS STRONG/PALMS EAST, INC. NAME 1201 SOUTH ORLANDO AVENUE, SUITE 360 STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32789 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 200005024572-- -02/27/02--01077--015 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Pleo II. 3 (C.) PRINTED NAME OF SIGNING GENERAL PARTNER

Strong/Palms East, Inc., General Partner

1/25/02

407-629-1800

Daytime Phone #