2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A 97000002505 01 APR 27 PM 5: 35 Universal Land Title of The Palm Brackes, Ltd SECRETARY OF STATE TAULAHASSEE, FUORIDA Principal Place of Business Mailing Address 3399 PGA Boulevand suite 150 PALM BEACH GARDENS, FI 3340 3399 PGA Boulevard, Skite 150 PAIM BEACH O ARRENS, FI 33410 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent UNIVERSAL LAND TITLE, INC. Street Address (P.O. Box Number is Not Acceptable) 1555 PALM BEACH LAKES BLVD., SUITE 1000 WEST PALM BEACH FL 33401 City 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 (NOTE: Registered Agent signature required when reinstating) 10. Amount of Capital Contributions 🟂 11 MAKE CHECK PAYABLE TO DEPT OF STATE 9. Capital Contributions_ 5,000. 5,000. SEE REVERSE SIDE FOR FEE INFORMATIONS 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 ADDRESS CHANGES ONLY GR2E003 (11/00) DOCUMENT # H93554 STREET ADDRESS NAME Universal Land Title, Inc. STREET ADDRESS 1555 PALM BEACH LAKES BLVD., SUITE 1000 CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33401 DOCUMENT # 500004193785 STREET ADDRESS NAME ·05/10/01--01100--014 STREET ADDRESS CITY-ST-ZIP ****150.00 ****150.00 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT -STREET ADDRESS STREET ADVRESS CITY-ST-ZIP 14. Thereby 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

APPRUTT