

2002 UNIFORM BUSINESS REPORT (UBR)

0017354 AT

DOCUMENT # **A97000002586**

1. Entity Name
LEF/NORTHBRIDGE, LTD.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAR 28

Principal Place of Business
**2601 S. BAYSHORE DRIVE
SUITE 300-A
MIAMI FL 33133-5413**

Mailing Address
**ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046-0102**



2. Principal Place of Business
One Greenway Plaza

3. Mailing Address
Suite 850

DUE BY MAY 1, 2002

Suite, Apt. #, etc.
Suite 850

Suite, Apt. #, etc.
Suite 850

City & State
Houston TX

City & State
Houston TX

4. FEI Number
65-0798251

Applied For
Not Applicable

Zip
77046

Country
USA

Zip
77046

Country
USA

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRIEDMAN, DAVID A
2601 S. BAYSHORE DRIVE, STE 300-A
MIAMI FL 33133-5413**

Name
Robert L. Shapiro

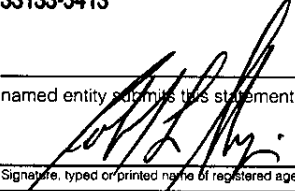
Street Address (P.O. Box Number is Not Acceptable)
2627 Ives Dairy Road

Suite 118

City
Aventura

FL Zip Code
33180

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.

3/01/02
DATE

9. Capital Contributions as Shown on record. **\$1,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **Same**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**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 # **P97000101122**
NAME **LEF/NORTHBRIDGE, INC.**
STREET ADDRESS **2601 SOUTH BAYSHORE DRIVE, STE. 300-A**
CITY-ST-ZIP **MIAMI FL 33133-5413**

STREET ADDRESS **One Greenway Plaza, Suite 850**
CITY-ST-ZIP **Houston, Texas 77046**

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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 **LEF/Northridge, Ltd., by its general partner, LEF/Northridge Inc., by Sandra E. Ray, VP and Secretary**

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-5-02 713-850-1850
Date Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE