

2001 UNIFORM BUSINESS REPORT (UBR)

0007625 AF

DOCUMENT # **A97000002659**

1. Entity Name

ALTMAN PARTNERS TRADITION, LTD.

FILED
01 APR 27 PM 5:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2201 CORPORATE BLVD., N.W., SUITE 200 BOCA RATON FL 33431	Mailing Address 2201 CORPORATE BLVD., N.W., SUITE 200 BOCA RATON FL 33431
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number 65-0815266	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROAD AND CASSEL
C/O JEFFREY A. DEUTCH
7777 GLADES ROAD, SUITE 300
BOCA RATON FL 33434**

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. (NOT Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record. **\$64,452.00**

10. Amount of Capital Contributions in FLORIDA to date.

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 #	856211
NAME	ALTMAN DEVELOPMENT CORPORATION
STREET ADDRESS	2201 CORPORATE BLVD., N.W., SUITE 200
CITY-ST-ZIP	BOCA RATON FL 33431

STREET ADDRESS	
CITY-ST-ZIP	

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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

Altman Development Corporation, General Partner

SIGNATURE: By: **SIGNATURE REQUIRED**

4/24/01 (561) 997-8661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E003 (11/00)