2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A9800000019 1. Entity Name							5 11 5 0		
THE FAWCETT FAMILY LIMITED PARTNERSHIP I, LTD.							FILED SECRETARY OF STATE EDIVISION OF CORPORATIONS		
Principal Place of Business Mailing Address 11780 U.S. HIGHWAY ONE, SUITE 300 11780 U.S. HIGHWAY ONE NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 3								. *00 MAY 12 PM 1:33	
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2. Principal Place of Business 12213 N. Circle Drive 3. Mailing Address 12213 N. Circ						Driv	e	1	
Suite, Apt. #, etc. Suite, Apt. #, etc								DO NOT WRITE IN THIS SPACE	
City & State	_		City & State				4. FEI Number 65-0803624 Applied For Not Applicable		
Zip Country			1 2	N. Palm Beach, FL. Zip Country				5 Contificate of Status Decired S8.75 Additional	
33408 USA 6. Name and Address of Current F					JSA		7. Name and Address of New Registered Agent		
						Name Deloitte & Touche, LLP			
FHS CORPORATE-SERVICES, INC. 11780 U.S. HIGHWAY ONE, SUITE 300						Street Address (P.O. Box Number, is Not Acceptable) 1645 Palm Beach Lakes Blvd., Ste. 900			
NORTH PALM BEACH FL 33408						2010 2011 2010 2110. y. 2001 300			
						West	Pal	m Beach FL Zip Code 33401	
8. The above named entity submits this statement for the purpose of changing its register.									
SIGNATURE .	Mul. Signature, typed	or printed name of registered agent	and title i	AULLA MATE	Registere	d Agent signaf	ure required	Versen Har May 10, 2000	
9. Capital Contributions as Shown on record. 10. Amount of Capital of in FLORIDA to date									
	Α (GENERAL PARTNER	THAT	IS A BUSINESS EN	TITY M	UST BE I	REGIST	ERED AND ACTIVE WITH THIS OFFICE. t must be filed to change a general partner.	
12.		GENERAL PARTNE			13.	, an ame	numem	ADDRESS CHANGES ONLY	
DOCUMENT# NAME	P97000107276 FAWCETT, INC.					STREET ADDRESS 12213 N. Circle Drive			
STREET ADDRESS	11780 U.S. HIGHWAY ONE, SUITE 300 NORTH PALM BEACH FL 33408					-ST-ZIP	12213 N. CITCIE DITVE		
CITY-ST-ZIP DOCUMENT#	NORTH PALM BEACH FL 33406						North Palm Beach, FL 33408		
NAME (STRI	EET ADDRESS			
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STREET ADDRESS						-ST-ZDP			
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 SVINTAND DIREAUCEMENT (III)									
SIGNATURE: SVIVIAN PREAWCETTURED WWW ZOTO Date Date Date Date Date Date Date Date									