A98000000834 **DOCUMENT #**

1. Entity Name

NAME STREET ADDRESS

NAME STREET ADDRESS

CITY-ST-ZIP DOCUMENT #

CITY-ST-ZIP DOCUMENT #

BRÍTTANY BAY AT ANDROS ISLE, LTD.



\$ MAR 26 PH 2: 43

Principal Place of Business 3111 UNIVERSITY DRIVE, SUITE 610
CORAL SPRINGS FL 33065

Mailing Address 3111 UNIVERSITY DRIVE. SUITE 610 CORAL SPRINGS FL 33065

2. Principal Place of Business 3. I			Mailing Address				 		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DUE BY MAY 1, 2003				
City & State			City & State		4. FEI Number	65-0828299		Applied For Not Applicable	
Zip	Country	Zip		Country	5. Certificate o	f Status Desired		5 Additional equired	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
11001001				Name		-	- 1		
HODKIN, PETER M ESQUIRE 1 E. BROWARD BLVD., SUITE 1501			Street Address (P.O. Box Number is Not Acceptable)						
FORT LAUDERDALE FL 33301				-	·				
		,		City			FL Zi	o Code	
the obligat	named entity submits this statementions of registered agent.			egistered office or registor.	ered agent, or both			with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions \$1,500,000,000 10. Amount of Capital Contributions					11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE				
9. Capital Contributions as Shown on record. \$1,500,000.00			in FLORIDA to dat	e. 950, 0	SEE REVERSE SIDE FOR FEE INFORMATION				
	A GENERAL PARTNEI NOTE: General Partners I								
12.	12. GENERAL PARTNER INFORMATION				3. ADDRESS CHANGES ONLY				
DOCUMENT # NAME	P97000068649 ZUCKERMAN HOMES AT ANDROS ISLE, INC. 3111 UNIVERSITY DRIVE, SUITE 610 CORAL SPRINGS FL 33065			STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				CITY-ST-ZIP					
DOCUMENT #	L01000021869 BANKATLANTIC VENTURE PARTNERS 3, LLC 1750 E. SUNRISE BLVD., THIRD FLOOR FT LAUDERDALE FL 33304			STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				CITY-ST-ZIP	500014763995 03/26/0301067006 **526, 25				
DOCUMENT #				STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				CITY-ST-ZIP					
DOCUMENT #				STREET ADDRESS					

NAME STREET ADDRESS CITY-ST-ZIP 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

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

SIGNATURE

Daytime Phone #