## **2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR**

A98000001161 **DOCUMENT #** 

Principal Place of Business 2295 CORPORATE BLVD.. N.W., SUITE 222

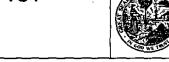
P.O. BOX 5010

12.

**BOCA RATON FL 33431** 

1. Entity Name

nh6 lr IV, ltd.		



Mailing Address 2295 CORPORATE BLVD.. NW

**SUITE 222** 

BOCA RATON FL 33431

Principal Place of Business 3. Mailing Address					]		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DUE BY MAY 1, 2003		
City & State		City & State	City & State		4. FEI Number 65-0833653		Applied For
							Not Applicable
Zip	Country	Zip	Zip Country			ficate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
HERRICK, NORTON 2295 CORPORATE BLVD., N.W., SUITE 222			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON	FL 33431						
	<u> </u>			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. I am familiar with, and accept the obligations of registered agent.							

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.	I am familiar with,	and accept
	the obligations of registered agent.		

SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions \$100.00 as Shown on record.

10. Amount of Capital Contributions in FLORIDA to date.

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

03 HAY -5 PH 7: 02

SECRETARY OF STATE TALLAHASSEE FLORIDA

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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY

	DOCUMENT # NAME	P98000042235 G-P NH6 LR IV, INC.	STREET ADDRESS	
ļ	STREET ADDRESS CITY-ST-ZIP	2295 CORPORATE BLVD., N.W., SUITE 222 BOCA RATON FL 33431	CITY-ST-ZIP	
	DOCUMENT # NAME		STREET ADDRESS	100018026431 05/05/0301126001 ***8771.25
	STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
STAPLE CHECK HERE	DOCUMENT # NAME		STREET ADDRESS	
	STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
	DOCUMENT # NAME		STREET ADDRESS	
	STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
	DOCUMENT # NAME		STREET ADDRESS	
	STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	, and the second se
	DOCUMENT # NAME	·	STREET ADDRESS	
	STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
- 1	44 11			

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

SIGNATURE:

TITLE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #