(214)720-7813

2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

DOCUMENT # A9800001666 1. Entity Name CSC DOVER OAKS, LTD.					FILED SECRETARY OF STATE DIVISION OF CORPORATIONS			
Principal Place of Business 200 CRESCENT COURT, SUITE 1650 DALLAS TX 75201 Mailing Address 200 CRESCENT COURT, SUITE 1650 DALLAS TX 75201-1829)	00 FEB 18 PM 12: 45			ı,
Principal Place of Business								
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.			Svite	, 1600	DO NOT WRITE IN THIS SPACE			
City & State City & State					4. FE! Number 75-2769670	ì	Applied For Not Applicat	ole
Zip Country		Zip	Country		5. Certificate of Status Desired		8.75 Additional ee Required	
	6. Name and Address of Current F	legistered Agent		Name	7. Name and Address of New I	legistered A	gent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Accepte		ablo)		
				Street Address (F.O. Box Number is Not Addeptable			_
PLANTATION FL 33324				City	FL Zip Code			
8. The above	named entity submits this statement for	the purpose of changing its r	registered	office or register	red agent, or both, in the State of F	orida.		┨,
SIGNATURE .	Signature, typed or printed name of registered agent ar	id title if applicable. (NOTE:	: Registered A	Agent signature required	f when reinstating)	DATE		
9. Capital Contributions as Shown on record. \$3,600,000.00 In FLORIDA to date.				tions 3.500,00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
23 21,01111	A GENERAL PARTNER TH	IAT IS A BUSINESS ENT	TITY MU	ST BE REGIST	FERED AND ACTIVE WITH TH	IS OFFICE.		
12.	NOTE: General Partners MAY NOT be changed on the GENERAL PARTNER INFORMATION				ADDRESS CHANGES ONLY			
DOCUMENT# NAME	CSC II, L.L.C.			TADORESS		Sui	te 1600	CR2E003 (9/99)
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STREET ADORESS CITY-ST-ZIP			CITY-S	it-zip				
DOCUMENT# NAME			STREET	ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-S					
14. I hereby of indicated the received	certify that the information supplied with on this report is true and accurate and t er or trustee empowered to execute this	this filing does not qualify for hat my signature shall have the report as required by Chapte	the exem he same i er 620, Fig SEE A	ption stated in Se legal effect as if n orida Statutes TTACHED S	ection 119.07(3)(i), Florida Statutes. nade under oath; that I am a Gener IGNATURE ADDENDUN	I further certical Partner of the second control of the second con	fy that the information he limited partnership) Or