

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0012352
AT

DOCUMENT # A98000001861

1. Entity Name

MIZNER'S PRESERVE AT DELRAY BEACH, LTD.

02 APR 10 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 902 CLINT MOORE RD., SUITE 124 BOCA RATON FL 33487	Mailing Address 902 CLINT MOORE RD., SUITE 124 BOCA RATON FL 33487
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2. Principal Place of Business 15340-Jog Road Suite, Apt. #, etc. 200 City & State Delray Beach, FL Zip 33446 Country USA	3. Mailing Address 15340-Jog Road Suite, Apt. #, etc. 200 City & State Delray Beach, FL Zip 33446 Country USA
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DUE BY MAY 1, 2002

4. FEI Number 65-0945791	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MORTON, MICHAEL 902 CLINT MOORE RD., SUITE 124 BOCA RATON FL 33487

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 15340-Jog Road Suite 200 City Delray Beach FL Zip Code 33446
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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 DATE 4/10/02
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9. Capital Contributions as Shown on record. \$1,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P93000020897 MORTON GROUP, INC. 902 CLINT MOORE RD., SUITE 124 BOCA RATON FL 33487	STREET ADDRESS CITY-ST-ZIP	15340-Jog Road, Suite 200 Delray Beach, FL 33446
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	700005258317--9 -04/12/02--01089--017 ****141.25 ****141.25
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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

SIGNATURE:	Date: 4/10/02	Daytime Phone #: 561 865 9222
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CR2E003 (9/01)