

# 2002 UNIFORM BUSINESS REPORT (UBR)

BOOK 5 AI

**DOCUMENT # A98000001869**  
 1. Entity Name  
**ELMOR ASSOCIATES, LTD.**

FILED

02 APR -8 PM 1:51

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



Principal Place of Business: **C/O IRVING SHIMOFF, 200 S BISCAYNE BLVD., SUITE 1050, MIAMI FL 33131**  
 Mailing Address: **JOSHUA KAMERMAN, 885 SECOND AVE., 26TH FLOOR, NEW YORK NY 10017**

2. Principal Place of Business: **ELMOR ASSOCIATES, LTD**  
 3. Mailing Address: **JOSHUA KAMERMAN**

Suite, Apt. #, etc.: **5500 Collins Ave., Suite 302** (Miami Beach, FL) / **655 Third Ave., FL 8** (New York, N.Y.)

**DUE BY MAY 1, 2002**  
 4. FEI Number: **11-2303164**  
 Applied For:  / Not Applicable:

Zip: **33140** / Country: / Zip: **10017** / Country:

5. Certificate of Status Desired:  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**SHIMOFF, IRVING, 200 S BISCAYNE BLVD., SUITE 1050, MIAMI FL 33131**

7. Name and Address of New Registered Agent  
 Name: **ROBERT L. KING**  
 Street Address (P.O. Box Number is Not Acceptable): **2780 EAST OAKLAND PARK BOULEVARD**  
 City: **FORT LAUDERDALE** FL Zip Code: **33306**

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: *Robert King* / **Robert L. King** / DATE: **4/2/02**

9. Capital Contributions as Shown on record: **\$902,237.00**  
 10. Amount of Capital Contributions in FLORIDA to date:  
 11. **MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

**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	
DOCUMENT #	<b>P98000042451</b>
NAME	<b>LIGHT PROPERTIES, INC.</b>
STREET ADDRESS	<b>5500 COLLINS AVENUE, SUITE 302</b>
CITY-ST-ZIP	<b>MIAMI BEACH FL 33140</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	<b>400005258674--6</b>
CITY-ST-ZIP	<b>-04/12/02--01103--010</b> <b>****526.25 ****526.25</b>
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E003 (9/01)

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: *Light Properties, Inc. G.P. by Steven Reutlinger, Jr.* / **Light Properties, Inc. G.P. by Steven Reutlinger, Jr.** / DATE: **3-12-02**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #