

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001878**

1. Entity Name  
**151 WORTH AVENUE PARTNERSHIP, LTD.**



FILED

03 MAY -6 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**C/O THE GOODMAN COMPANY  
777 SOUTH FLAGLER DRIVE, SUITE 1101E  
WEST PALM BEACH FL 33401**

Mailing Address  
**C/O THE GOODMAN COMPANY  
777 SOUTH FLAGLER DRIVE, SUITE 1101E  
WEST PALM BEACH FL 33401**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1, 2003**

City & State

City & State

4. FEI Number **23-1981416**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHEWALTER, WILLIAM  
C/O THE GOODMAN COMPANY  
777 SOUTH FLAGLER DRIVE  
WEST PALM BEACH FL 33401**

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions as Shown on record. **\$8,535,707.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$8,535,707.00**

11. MAKE CHECK PAYABLE TO FL. 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

13. ADDRESS CHANGES ONLY

DOCUMENT # **L98000001303**  
NAME **NORTH WORTH LLC**  
STREET ADDRESS **777 SOUTH FLAGLER DRIVE**  
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

STREET ADDRESS

CITY-ST-ZIP

**000018294980**

**05/06/03--01062--025 \*\*535.00**

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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

**North Worth LLC, general partner, by: Goodman Properties, Inc., its manager**

SIGNATURE:

*William A. Shewalter*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**(561) 833-3777**

Date

Daytime Phone #

CP2E003 (10/02)

0003076  
AV

STAPLE CHECK HERE