LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

02 JUN 11 AM 10:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A98000002023

1. Entity Name

WOODBINE PARTNERS LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

2. Principal Place of Business	3. Mailing Address
273 SANDPIPER DR Suite, Apt. #, etc.	273 SANDPIPER DR Suite, Apt. #, etc.
City & State: PALM BEACH	City & State: PALM BEACH
Zip: 33480 Country: USA	Zip: 33480 Country: USA

4. FEI Number: 65-0895802 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired X $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: BENZ, JOHN E

Street Address (P.O. Box Number is Not Acceptable): 273 SANDPIPER DR

City: PALM BEACH FL Zip Code: 33480

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

9. Capital Contributions as Shown on record: $10,000,000.00

10. Amount of Capital Contributions in FLORIDA to date: $10,000,000.00

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 # NAME STREET ADDRESS CITY-ST-ZIP	BENZ, JOHN E 273 SANDPIPER DR PALM BEACH FL 33480
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BENZ, BARBARA M 273 SANDPIPER DR PALM BEACH FL 33480
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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STAPLE CHECK HERE

STREET ADDRESS CITY-ST-ZIP	400 Grn 437.50 - Up 88.75 - Adm 8.75 - Cert
STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP	900005764039--4 -06/13/02--01003--014 ****535.00 ****535.00
STREET ADDRESS CITY-ST-ZIP	900005764039--4 -06/13/02--01003--015 ****400.00 ****400.00

CR2E003B (12/01)

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: John E. Benz John E. Benz Gen. Partner 6/7/02 (561)686-6009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #