FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

A98000002365

SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JAN 22 PM 1:07

1. Name of Limited Partnership: MBS - REGENTS PLACE, LTD.

1a. DOCUMENT # A98000002365

Mailing Address: ONE GALLERIA BLVD. SUITE 1950 METAIRIE, LA 70001

Principal Office Address: (SAME)

3. Date Formed or Registered: 10-13-98

3a. Date of Last Return: N/A

4. State or Country of Formation: FLORIDA

5a. Capital Contributions: $ 1,000,000

5b. Amount of Capital Contributions in FLORIDA: 0

2. Mailing Address: ONE GALLERIA BLVD.
Suite, Apt #, etc: SUITE 1950
City & State: METAIRIE, LA
Zip: 70001 Country: USA

2a. Principal Office Address: 2688-1 SEAFORD CIR.
Suite, Apt #, etc:
City & State: TAMPA
Zip: 33613 Country: USA

6. FEI Number: 72-1426507 ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☐ $8.75 Additional Fee Required

8.

9. **Name and Address of Current Registered Agent**

MICHAEL B. SMUCK
13016 LEEDS COURT
TAMPA, FL. 33613

10. If Change, List New Registered Agent/Office

Name: N/A
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt #, etc.
City FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration Document Number
SEAFORD CIRCLE, L.L.C.	ONE GALLERIA BLVD. SUITE 1950	METAIRIE, LA 70001	L98000002241

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1/22/99

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntary, furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I relieve the Division of Corporations from any liability of non compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership or receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE DATE 10-22-98

Typed or Printed Name of General Partner Signing Form: MICHAEL B. SMUCK, MANAGING MEMBER Daytime Telephone Number: 504-836-5075