

2001 UNIFORM BUSINESS REPORT (UBR)

0020272 SP

DOCUMENT # A98000002893

1. Entity Name
SAWGRASS LIMITED PARTNERSHIP NO. 1

FILED

01 APR 13 PM 12:35

Principal Place of Business: 1025 GREENWOOD BLVD., SUITE 175 LAKE MARY FL 32746
Mailing Address: 4097 PARK DRIVE NORCROSS GA 30093

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: 3950 Shackelford Road, Suite 300, Duluth, GA

4. FEI Number: 59-3551513
Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent
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.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

9. Capital Contributions as Shown on record: \$0.00
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 #	B99000000219
NAME	DUKES-WEEKS REALTY LTD
STREET ADDRESS	8888 KEYSTONE AVE., STE 1200
CITY-ST-ZIP	INDIANAPOLIS IN 46240
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	600 East 96th Street, Suite 100
CITY-ST-ZIP	Indianapolis, IN 46240
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500004035005--5
CITY-ST-ZIP	04/20/01 01049 007 ***141.25 ***141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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. By: **Duke-Weeks Realty Corporation, the general partner of Duke-Weeks Realty Limited Partnership, general partner of Sawgrass Limited Partnership No. 1**

SIGNATURE: Elizabeth C. Belden Elizabeth C. Belden 4/11/01 770-717-3226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)