

# 2002 UNIFORM BUSINESS REPORT (UBR)

0019287 AB

DOCUMENT # **A98000002893**

1. Entity Name  
**SAWGRASS LIMITED PARTNERSHIP NO. 1**

FILED

02 APR 30 PM 1:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**1025 GREENWOOD BLVD., SUITE 175  
LAKE MARY FL 32746**

Mailing Address  
**3950 SHACKLEFORD RD., STE. 300  
DULUTH GA 30096**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

**DUE BY MAY 1, 2002**

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

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	<b>B9900000219</b>	STREET ADDRESS	
NAME	<b>DUKES-WEEKS REALTY LTD</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>600 EAST 96TH ST., STE. 100</b>		
CITY-ST-ZIP	<b>INDIANAPOLIS IN 46240</b> <i>Amendment</i>		
DOCUMENT #	<i>Duke Realty Limited Partnership</i>	STREET ADDRESS	<b>600005271466--8</b>
NAME	<i>3950 Shackleford Rd., Ste. 300</i>		<b>-04/15/02--01032--013</b>
STREET ADDRESS	<i>Duluth, GA 30096</i>	CITY-ST-ZIP	<b>****141.25 ****141.25</b>
CITY-ST-ZIP			<b>FF \$ 141.25</b>
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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 Realty Corporation, the general partner of Duke Realty Limited Partnership, general partner of Sawgrass Limited Partnership, No. 1**

SIGNATURE: *John R. Gaskin, Sec.* Date **4-10-02** Daytime Phone # **770-717-3200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CR2E003 (9/01)