| 2002 UNIFORM BUSINESS REPORT (UBR)   |  |           |   |         |  |   | APPRUV:<br>AND                          | •                          |  |
|--|--|-----------|---|---------|--|---|---|----------------------------|--|
| DOCUMENT # A9900000086  1. Entity Name   |  |           |   |         |  |   | FILED                                   |                            |  |
| ADC EQUITY PARTNERS PLANTATION LAKES, LTD.   |  |           |   |         |  |   | 02 APR 16 AM 8: 47                      |                            |  |
|  |  |           |   |         |  | s   | ECRETARY OF ST<br>LLAHASSEE, FLO        | ATE<br>o'in A              |  |
| Principal Place of Business  2201 CORPORATE BLVD N.W SUITE 200  BOCA RATON FL 33431            |  |           | Mailing Address  2201 CORPORATE BLVD., N.W., SUITE 200  BOCA RATON FL 33431 |         |  |   |   |                            |  |
| 2. Principal Place of Business 3. Mailing Address  |  |           |   | ,       |  |   |   |                            |  |
| Suite, Apt. #, etc.  |  |           | Suite, Apt. #, etc.   |         |  |   | DUE BY MAY 1, 2                         | 002                        |  |
| City & State   |  |           | City & State  |         |  | 4. FEI Number   | 65-0891072                              | Applied For Not Applicable |  |
| Zip Country  |  | 7         | Zip Country   |         | ntry   | 5. Certificate of Status Desired   \$8.75 Additional Fee Required |   |                            |  |
| •  | 6. Name and Address of Curre   | nt Regist | tered Agent   |         |  | 7. Name and Address of New Registered Agent                       |   |                            |  |
| BB0.B 0.005  |  |           |   |         | Name   |   |   |                            |  |
| BROAD & CASSEL   |  |           |   |         | Street Address (P.O. Box Number is Not Acceptable) |   |   |                            |  |
| C/O JEFFREY A. DEUTCH<br>7777 GLADES ROAD, SUITE 300   |  |           |   |         |  |   |   |                            |  |
| BOCA RATON FL 33434  |  |           |   |         | City FL Zip Code                                   |   |   |                            |  |
|  |  |           |   |         | Ony.   |   | <b>F</b>                                | L   Zip code               |  |
| 8. The above   | named entity submits this statement                                      | for the p | urpose of changing its r  | egister | ed office or regi                                  | istered agent, or both,   | , in the State of Florida.              |                            |  |
| SIGNATURE.   |  |           |   |         |  |   |   |                            |  |
| Signature, typed or printed name of registered egent and title if applicable.                  |  |           |   |         | hutions  | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE                          |   |                            |  |
| 9. Capital Contributions as Shown on record. \$800.00 10. Amount of Capital in FLORIDA to date |  |           |   | te.     | SEE REVERSE SIDE FOR FEE INFORMATION               |   | OR FEE INFORMATION                      |                            |  |
|  | A GENERAL PARTNER NOTE: General Partners I                               |           |   |         |  |   |   |                            |  |
| 12. GENERAL PARTNER INFORMATION  |  |           |   |         | ,  | ADDRESS CHANGES ONLY  |   |                            |  |
| DOCUMENT #<br>NAME   | AME ALTMAN DEVELOPMENT CORPORATION 2201 CORPORATE BLVD., N.W., SUITE 200 |           |   | STRE    | EET ADDRESS  |   | ,                                       |                            |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |           |   | CITY    | '-ST-ZIP   |   |   |                            |  |
| DOCUMENT #<br>NAME   |  |           |   | STRE    | EET ADDRESS  |   |   |                            |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |           |   | CITY    | -ST-ZIP  | 3000053141237<br>-04/22/0201092010<br>*****141.25 *****141.25     |   |                            |  |
| DOCUMENT #<br>NAME   |  |           |   | STRE    | EET ADDRESS  |   | ****141.25                              | ****141.25                 |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |           |   | CITY    | -ST-ZIP  |   |   |                            |  |
| DOCUMENT #<br>NAME   |  |           |   | STRE    | EET ADDRESS  |   |   |                            |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |           |   | CITY    | -ST-ZIP  |   |   |                            |  |
| DOCUMENT /   |  |           |   | STRE    | EET ADDRESS  |   | , |                            |  |
| STREET ADDRESS<br>CITY-ST-ZIP  |  |           |   | CITY    | -ST-ZIP  |   |   |                            |  |
| DOCUMENT <b>#</b><br>NAME  |  |           | <u> </u>  | STRE    | ET ADDRESS   |   |   |                            |  |

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

ALTMAN DEVELOPMENT CORPORATION, GENERAL PARTNER

CITY-ST-ZIP

SIGNATURE: BY:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR BEINTERNAME OF SIGNING GENERAL PARTNER

4/11/02 (561) 997-8661
Date Daytime Phone #