2002 UNIFORM BUSI	NESS REPOR	rT (UBR)	μ	PPRUYI .	
OCUMENT # A9900001006				FILED	
TOWNE PLACE APARTMENTS - PHASE II,	•		IN 14 AM 9: 25		
incipal Place of Business Mailing Address 59 CAROLINA AVENUE 359 CAROLINA AVENUE VINTER PARK FL 32789 WINTER PARK FL 32789		TALLE	SECRETARY OF STATE TALLAHASSEE, FEORIDA		
Principal Place of Business 3901 GARDEN PLAZA WAY Suite, Apt. #, etc.	3. Mailing Address 1950 STONE 64 TE DRIVE Suite, Apt. #, etc.		(1000)	DUE BY MAY 1, 2002	
City & State ORLANDO FL	SUITE 250 City & State BIRMINISHAM	AL	4. FEI Number	59-3586497 Applied For Not Applicable	
Zip Country	3524a	Country	5. Certificate of 7. Name and Ad	Status Desired S8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOWNING, GRANT T GODBOLD DOWNING SHEAHAN & BILL, PA 222 WEST COMSTOCK AVE., S# 101 WINTER PARK FL 32789			Name C.T.=CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1300 South Pink Tsuand Road City PLANTATION FL Zip Code 333324		
. The above named entity submits this statement to	Wurke_	egistered office on	READY GASTREE DOTH, ASSISTANT SECRETA	DATE	
Capital Contributions \$5,214,526.57 10. Amount of Capital Contributions in FLORIDA to date.			TOUR TERES AND AC	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. 2. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY					
OCUMENT / 370124 EPOCH PROPERTIES, INC. 100 STREET ADDRESS	OWN PLACE, LLC 150 STONE BATE DRIVE SUITE 750 BIRMINGHAM, AL 3524:	STREET ADDRESS CITY-ST-ZIP			

F96000000457 DOCUMENT # STREET ADDRESS LIC VENTURES INC. NAME 1300 SOUTH MOPAC EXPWY. STREET ADDRESS CITY-ST-ZIP AUSTIN TX 78748 CITY-ST-ZIP 005622953 -05/29/02--01012--015 DOCUMENT # STREET ADDRESS ****526.25 ****526.25 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREE* ADDRESS CITY-ST-ZIP 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 520, Florida Statutes

SIGNATURE:

4/30/2002