

2001 UNIFORM BUSINESS REPORT

DOCUMENT # A99000001102

1. Entity Name

Westchester Apartments Limited Partnership

Principal Place of Business

950 W. VALLEY RD., SUITE 2902
WAYNE PA 19087

Mailing Address

950 W. VALLEY RD., SUITE 2902
WAYNE PA 19087

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

233007682

Applied For

Not Applicable

Zip

County

Zip

County

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

N/A

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

Signature, typed or printed name of Registered Agent (Required Agent signature required when reinstalling)

DATE

BRIAN COURTNEY, ASST. VP.

10-25-01

9. Capital Contributions as shown on record

☐

11. May Check Payable to
Department of State

10. Capital Contributions in Florida
to date

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

12.

ADDRESS CHANGES ONLY

Document#

P99000055370

NAME

GPG VENTURE I, INC.

STREET ADDRESS

950 W. VALLEY RD., SUITE 2902

CITY-ST-ZIP

WAYNE PA 19087

STREET ADDRESS

CITY-ST-ZIP

REINSTATEMENT 2001

Document#

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

600004658356--7

-10/30/01--01002--018

****641.25 ****641.25

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 or supplemental 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;

Westchester Apartments Limited Partnership

By: GPG VENTURE I, INC., as general partner

SIGNATURE

IRA GINSBERG, PRESIDENT/DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

10/19/01

813-968-2277



ACCOUNT NO. : 072100000032

REFERENCE : 197562 5051651

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : October 25, 2001

ORDER TIME : 11:47 AM

ORDER NO. : 197562-005

CUSTOMER NO: 5051651

CUSTOMER: Mr. Anthony Varrone
Greenberg Traurig, P.a.
111 North Orange Avenue
Suite 2050
Orlando, FL 32801

RECEIVED
01 OCT 25 PM 12:25
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: WESTCHESTER APARTMENTS LIMITED
PARTNERSHIP

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder
EXAMINER'S INITIALS _____