

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000001178

1. Entity Name

MILLER ROAD PARTNERS, LTD.

Principal Place of Business

C/O WHITE & CASE LLP
200 SOUTH BISCAYNE BLVD., SUITE 4900
MIAMI FL 33131

Mailing Address

C/O BOYETT PROPERTIES, INC.
1553 SAN IGNACIO
CORAL GABLES FL 33146-3006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 27 AM 3:05



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Miller Road Partners, Ltd

Suite, Apt. #, etc.

1553 San Ignacio Ave.

City & State

Coral Gables, FL

Zip

33146

Country

3. Mailing Address

Miller Road Partners, Ltd

Suite, Apt. #, etc.

1553 San Ignacio Ave.

City & State

Coral Gables, FL

Zip

33146

Country

4. FEI Number

65-0945748

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SAWYER, EDWARD E

C/O WHITE & CASE LLP

200 SOUTH BISCAYNE BLVD., SUITE 4900

MIAMI FL 33131

7. Name and Address of New Registered Agent

Name
Boyett James L

Street Address (P.O. Box Number is Not Acceptable)

1553 San Ignacio Ave.

City
Coral Gables

FL

Zip Code
33146

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 and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. Capital Contributions
as Shown on record.

\$1,300,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

1,300,000.00

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 # 569419
NAME BOYETT PROPERTIES, INC.
STREET ADDRESS 1553 SAN IGNACIO AVENUE
CITY - ST - ZIP CORAL GABLES FL 33146

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
James L. Boyett

Date

Daytime Phone #