

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000001258

1. Entity Name

GREENWELL INVESTMENTS LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY -5 PM 1:33

Principal Place of Business

550 BILTMORE WAY, STE 810
CORAL GABLES FL 33134

Mailing Address

550 BILTMORE WAY, STE 810
CORAL GABLES FL 33134-5779



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5275 S.W. 101 Street

3. Mailing Address

5275 S.W. 101 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number

65-0936926

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WHITE, ROBERT A
C/O DUNWODY WHITE & LANDON, P.A.
550 BILTMORE WAY, SUITE 810
CORAL GABLES FL 33134

Name
M & W Agents, Inc.

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

2101 Corporate Blvd., Suite 107

City
Boca Raton

FL

Zip Code
33431

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 reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$60,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$8,000,000

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 # P99000068024
NAME GREENWELL INVESTMENTS, INC.
STREET ADDRESS 700 CORAL WAY, #9
CITY - ST - ZIP CORAL GABLES FL 33134

STREET ADDRESS 5275 S.W. 101 Street
CITY - ST - ZIP Miami, FL 33156

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP

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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

Date

Daytime Phone #

4/10/2000 1305
605-2323