

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000001308	
Entity Name RETREAT-SEMINOLE LIMITED PARTNERSHIP (AMENDMENT FILED 4/6/00)	
Principal Place of Business C/O HEARTHSTONE 16133 VENTURA BLVD., SUITE 1400 ENCINO CA 91436	Mailing Address C/O HEARTHSTONE 16133 VENTURA BLVD., SUITE 1400 ENCINO CA 91436-2447

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

00 JUN 27 PM 1:29



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 05-4759870		☐ Applied For ☒ Not Applicable
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent GRIFFIN, JAMES K JR. VICTORIA PARK CENTER 1401 EAST BROWARD BLVD., SUITE 302 FT. LAUDERDALE FL 33301-2116	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date. \$100	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	L98000003194	STREET ADDRESS	
NAME	FL MSII/SEPII GP, L.C.	CITY - ST - ZIP	
STREET ADDRESS	16133 VENTURA BLVD., SUITE 1400		
CITY - ST - ZIP	ENCINO CA 91436		
DOCUMENT #		STREET ADDRESS	800003312778--0
NAME		CITY - ST - ZIP	-07/05/00-01054--002
STREET ADDRESS			****141.25 ****141.25
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
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DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
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 620, Florida Statutes

SIGNATURE: _____ **SIGNATURE REQUIRED** **See Signature Block Attached** 4/20/00 818/385-0005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

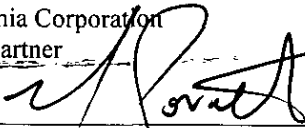
Attachment
A 990000001308

Form: 2000 Uniform Business Report (UBR)

FLORIDA SHELF PROJECT #42 LIMITED PARTNERSHIP,
A Florida limited partnership

By: FL MSII/SEPII GP, LLC
A Florida limited liability company
General Partner

By: Hearthstone
A California Corporation
General Partner

By: 
Mark A. Porath
Chief Financial Officer
and Senior Vice President

4/20/00