2000 UNIFORM BUSINESS A9700002191 A99000002191 DOCUMENT # 1. Entity Name DIVISION OF CORPORATIONS ADC EQUITY PARTNERS CANTERFIELD, 100 APR 20 PM 5: 44 Principal Place of Business Mailing Address 2201 CORPORATE BLVD., N.W., SUITE # 200 2201 CORPORATE BLVD., N.W., SUITÉ # 200 . **BOCA RATON, FLORIDA 33431 BOCA RATON, FLORIDA 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Broad & Cassel Street Address (P.O. Box Number is Not Acceptable) c/o Jeffrey A. Deutch 7777 Glades Road, Suite 300 Boca Raton, FL 33434 Zip Code FL 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. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions 11: MAKE CHECK PAYABLE TO DEPT. OF STATE in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. 856211 DOCUMENT # STREET ADDRESS **ALTMAN DEVELOPMENT CORPORATION** STREET ADDRESS 2201 CORPORATE BLVD., N.W., SUITE # 200. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON, FLORIDA 33431** DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 900003256939---5 CITY-ST-ZIP CITY-ST-ZIP -05/18/00--01025--025 DOCUMENT # ****141.25<u>***</u>*141.25 STREET-ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE DOCUMENT STREET ADDRESS NAME STREET ANDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS 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 ALPMAN DEVELOPMENT CORPORATION, GENERAL PARTNER 4/17/00 (561) 997-8661 SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone # SIGNATURE