

2001 UNIFORM BUSINESS REPORT (UBR)

0002978 AF

DOCUMENT # B00000000046

1. Entity Name

STP ASSOCIATES I LIMITED PARTNERSHIP

FILED

01 APR 30 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

300 HOLLYWOOD WAY
HOLLYWOOD FL 33021

Mailing Address

300 HOLLYWOOD WAY
HOLLYWOOD FL 33021

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2219295

Applied For

Not Applicable

5. Certificate of Status Desired ☒ X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STOTZER, THEODORE R
300 HOLLYWOOD WAY
HOLLYWOOD FL 33021

Name

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 and title if applicable.

(NOT) Registered Agent signature required when reinstating

DATE

9. Capital Contributions
as Shown on record.

7,781,756.93

10. Amount of Capital Contributions

in FLORIDA to date.

\$7,781,756.93

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 # F00000001008
NAME SREG (STP) INC
STREET ADDRESS 300 HOLLYWOOD WAY
CITY-ST-ZIP HOLLYWOOD FL

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

100004219231--9

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***2285.00 ***535.00

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FF \$526.25
AUS 8.75

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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

STP ASSOCIATES I LIMITED PARTNERSHIP

BY: SREG (STP), INC., its general partner

SIGNATURE By: EQUIF

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Theodore R. Stotzer, Executive Vice President

February 28, 2001

(954) 981-1000

Date

Daytime Phone #

CR2E003 (11/00)