

2001 UNIFORM BUSINESS REPORT (UBR)

0018652 AF

DOCUMENT # B00000000177

1. Entity Name

CFP I, L.P.

FILED

01 APR 30 PM 12: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business C/O CENTERAMERICA PROPERTY TRUST, L.P. 3901 BELLAIRE BLVD. HOUSTON TX 77025	Mailing Address C/O CENTERAMERICA PROPERTY TRUST, L.P. 3901 BELLAIRE BLVD. HOUSTON TX 77025
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 76-0645623	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
City Tallahassee FL Zip Code 32301

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 *Deborah D Skipper* Deborah D. Skipper 4-30-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent must be a resident of the State of Florida.) DATE

9. Capital Contributions as Shown on record. \$1,590,000.00	10. Amount of Capital Contributions in FLORIDA to date.	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 # F00000003338	NAME CFP, INC.	STREET ADDRESS	
STREET ADDRESS 3901 BELLAIRE BLVD.		CITY-ST-ZIP	
CITY-ST-ZIP HOUSTON TX 77025			
DOCUMENT #	NAME	STREET ADDRESS	
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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: *Deborah D Skipper* SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)

300000000177 (2)



ACCOUNT NO. : 072100000032

REFERENCE : 133155 7223852

AUTHORIZATION :

COST LIMIT : \$ 526.25

FILED
01 APR 30 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 30, 2001

ORDER TIME : 1:23 PM

ORDER NO. : 133155-025

CUSTOMER NO: 7223852

CUSTOMER: Ms. Mary Nguyen
Centeramerica Property Trust,
3901 Bellaire Blvd.

Houston, TX 77025

ANNUAL REPORT FILING

NAME: CFP I, L.P.

hxy/bo

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - Ext. 1115

EXAMINER'S INITIALS: _____

RECEIVED
01 APR 30 PM 2:24
DIVISION OF CORPORATION