

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 APR -9 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B01000000064

1. Entity Name

ALLIANCE GJ LIMITED PARTNERSHIP

Principal Place of Business

104 WILMOT ROAD, SUITE 350
DEERFIELD IL 60015

Mailing Address

104 WILMOT ROAD, SUITE 350
DEERFIELD IL 60015

2. Principal Place of Business

221 North LaSalle Street

3. Mailing Address

Suite, Apt. #, etc.

Suite 3700

City & State

Chicago, Illinois

City & State

Zip
60601

Country
USA

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

36-4423537

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$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

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.

DATE

9. Capital Contributions
as Shown on record.

\$1,971,000.00

10. Amount of Capital Contributions

in FLORIDA to date. \$1,971,000.00

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

DOCUMENT # F01000001124
NAME ALLIANCE GJ GP, INC.
STREET ADDRESS 221 N. LASALLE STREET, SUITE 3700
CITY-ST-ZIP CHICAGO IL 60601

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

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DOCUMENT #

NAME

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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

ALLIANCE GJ GP, INC., a Delaware corporation, General Partner

SIGNATURE: By: SIGNATURE REQUIRED

03/21/02 312/332/8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)