2002 UNIFORM BUSINESS REPORT (UBR)

				-		· ·		
DOCU 1. Entity Nam	••••	0000183		FILED				
TCR METROWEST II LIMITED PARTNERSHIP					02 MAR -5 AM 9: 35			
Principal Place of Business Mailing Address SUITE 1200 LOCK BOX 120						SECRETARY OF STATE TALLAHASSEE. FLORIDA		
SUITE 1200. LOCK BOX 128 717 NORTH HARWOOD DALLAS TX 75201 2. Principal Place of Business 3. Mailing Address								
201 N. New York AVe. 201 N. New				k Ave.				
Suite, Apt. #, etc. Suite 200 Suite Suite						DUE BY MAY 1, 2002		
City & Stat	e er Park, FL	City & State Winter Pa	City & State Winter Park, FL		4. FEI Number 75–2	938311	Applied For Not Applicable	
Zip 32789		Zip 32789	Cour	ntry	5. Certificate of		\$8.75 Additional Fee Required	
	6. Name and Address of Current				7. Name and A	ddress of New Registered		
				Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32301-2525							· · · · · · · · · · · · · · · · · · ·	
				City		FI	Zip Code	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. 10. Amount of Capital 0 in FLORIDA to date				ontributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION				
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS E	NTITY N	UST BE REG		TIVE WITH THIS OFFIC	DE.	
12.	GENERAL PARTNER		13.		nent must be med	ADDRESS CHANGES OF		
DOCUMENT # NAME	TCR METRO II, INC. 717 N. HARWOOD, SUITE 1200, L.B. 128		STR	EET ADDRESS	SS 201 N. New York Ave. #200		0	
STREET ADDRESS CITY-ST-ZIP			CITY	CITY-ST-ZIP Winter Park		k, FL 32789	1	
DOCUMENT # NAME			STRI	EET ADDRESS		-03/12/02(01051010	
STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZIP			111100	
DOCUMENT # NAME			STR	EET ADORESS				
STREET ADDRESS CITY-ST-ZIP			СІТУ	-ST-ZIP				
DOCUMENT # NAME			: STRI	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY	Y-ST-ZIP	·			
DOCUMENT # NAME			STRI	EET ADDRESS				
STREE) ADDRESS CITY-ST-ZIP		<u> </u>	СІТҮ	'-ST-ZIP			<u></u>	
DOCUMENT # NAME			STRE	EET ADDRESS				
STREET ADDRESS C/TY-ST-ZIP			СІТҮ	'-ST-ZIP				
indicated	certify that the information supplied with on this report is true and accurate and wer or trustee empowered to execute this	that my signature shall have	e the same	e legal effect as	if made under oath; th	Florida Statutes. I further ce at I am a General Partner c	ertify that the information of the limited partnership or	

STAPLE CHECK HERE