

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B01000000193

1. Entity Name

ITCR METROWEST II LIMITED PARTNERSHIP

FILED

02 MAR -5 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

SUITE 1200, LOCK BOX 128
717 NORTH HARWOOD
DALLAS TX 75201

Mailing Address

SUITE 1200, LOCK BOX 128
717 NORTH HARWOOD
DALLAS TX 75201

2. Principal Place of Business

201 N. New York Ave.

3. Mailing Address

201 N. New York Ave.

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

DUE BY MAY 1, 2002

City & State

Winter Park, FL

City & State

Winter Park, FL

4. FEI Number

75-2940189

Applied For

Not Applicable

Zip

32789

Country

USA

Zip

32789

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

S.A. filed 3-5-02
4,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date. \$4,000,000.00

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 # B01000000183
NAME TCR METROWEST II LIMITED PARTNERSHIP
STREET ADDRESS 717 N. HARWOOD, STE. 1200, L.B. 128
CITY-ST-ZIP DALLAS TX 75201

13. ADDRESS CHANGES ONLY

STREET ADDRESS 2001 Bryan Street Suite 3700
CITY-ST-ZIP Dallas, TX 75201

DOCUMENT #
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CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

FF \$526.25

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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

SIGNATURE: by TCR Metrowest II, LP
TALLAHASSEE, FLORIDA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date 2/20/02 Daytime Phone #

0016999 AT

CR2E003 (9/01)

STAPLE CHECK HERE