2002 UNIFORM BUSINESS REPORT (UBR)

DOG!	JMENT # B0100	0000263	<u> </u>			F1)	41
PREMIER PALM BEACH, L.P.				ţ	SECRETAR VISION OF	Y OF STATE CORPORATIONS	9/0-
Principal Place of Business Mailing Address					DO CEP II	AM 11: 35	1// Z
3201 W. GRIFFIN ROAD SUITE 106 SUITE 106					US SEL	•	
DANIA BEACH FL 33312 SUITE 106 DANIA BEACH FL 33312 DANIA BEACH FL 33312						Bil 33(61)(8)(38(1) 86(1) 86	(21 80)(2 83 ()) 86 ()2)(0)(8 8)(88 ()) (88)
2. Principal	3. Mailing Address	ailing Address					
Suite, Apt. #, etc. Suite, Apt. #, etc.				. .	<u> </u>	DUE BY CENTER	
City & Sta	ate	City & State		4. FEI Number Applied For			
Zip Country		Zip Country		у	5 Certificate o	of Status Desired	Not Applicable \$8.75 Additional
	6. Name and Address of Current I	Registered Agent					Fee Required
FIELDSTONE, RONALD R				7. Name and Address of New Registered Agent Name Name Seckelbaum Gordons			
201 ALHAMBRA CIRCLE, SUITE 601				Street Address (P.O. Box Number	is Not Acceptable)	
CORAL GABLES FL 33134					# 106	TTIN NO	
				City Dan	Boals		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. I am famillar with, and the obligations of registered agent.							. I am familiar with, and accept
SIGNATURE Signature-typed to printed name of registered agent and title if applicable.							
9. Capital Co		l Contribut	tions	-	11. MAKE CHECK PA	AYABLE TO DEPT. OF STATE	
us opewij	A GENERAL PARTNER TH	in FLORIDA to dat	ST RE DECICT	EPED AND AC	SEE REVERSE S	IDE 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.							
DOCUMENT #	L00000004128			ADDRESS		ADDRESS CHANG	ES ONLY
NAME STREET ADDRESS	3201 W. GRIFFIN ROAD		SIREELA	ADDRESS	 -		
CITY-ST-ZIP			CITY-ST	CITY-ST-ZIP			
DOCUMENT / NAME			STREET A	ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-	- ZIP	10	000779 -09/17/02	/80018 01040007
DOCUMENT # NAME	. -	and the same of th	STREET A	ODRESS		****926-7	25- ****926.25
STREET ADDRESS CITY-ST-ZIP			CITY-ST-	-ZIP			
DOCUMENT # NAME STREET ADDRESS			Street A	DORESS		<u>.</u>	
CITY-ST-ZIP		·	CITY-ST-	ZIP			
DOCUMENT # NAME	-		STREET AL	DDRESS			
STREET ALØRESS CITY-ST-ŽIP			CITY-ST-	ZiP			
DOCUMENT #			STREET AC	DDRESS			
STREET ADDRESS CITY-ST-ZIP	· .		City-St-2				
4. I hereby ce indicated of the receive	ertify that the information supplied with thing this report is true and accurate and that or or trustee empowered to execute this re	is filing does not qualify for the at my signature shall have the eport as required by Chapter	e exempti same leg 620, Florid	on stated in Sect pal effect as if mad da Statutes	ion 119.07(3)(i), F de under oath; tha	lorida Statutes. I furthe at I am a General Partr	er certify that the information her of the limited partnership or

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER SIGNATURE:

954-965-3636

CR2E003 (4/02)