<b>2002 UNIFORM</b>	<b>BUSINESS</b>	REPORT	(UBR
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STAPLE CHECK HERE

DOCUMENT # B0100000381  1. Entity Name					,	FILED				
TCR HIGHLAND BRANDON LIMITED PARTNERSHIP				02 MAR -5 AM 9: 35					2	
<del>11=14 - 14.</del>						SECRETARY OF STATE				•
Principal Place of Business Mailing Address 717 NORTH HARWOOD. SUITE 1200 717 NORTH HARWOOD. SU DALLAS TX 75201 DALLAS TX 75201		D. SUITE 12	UITE 1200			TALLAH	SSEE. FL	ÓRÍÐA		
•	Place of Business	3. Mailing Address		1				Elili <b>is</b> iai <b>se</b> ali <b>se</b> ali		
Suite, Apt.	N. New York Ave. #,etc. e 200	Suite Apt. #, etc. Suite 200	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			DUE BY MAY 1, 2002				
City & Stat	te	City & State	City & State			I Number			Applied Fo	or
Zip	er Park, FL Country	Winter Park Zip	Winter Park, FL Zip Country			5-2963	127 Status Desired	\$8	Not Applic  3.75 Additional	able
32789	9 USA 6. Name and Address of C	32789 Current Registered Agent	USA	}			Idress of New I	Fe	e Required	
CORROR	ATION SERVICE COMPANY		,	Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)				le)		
TALLAHA	SSEE FL 32301-2525									
			City FL Zip Code							
8. The above	named entity submits this state	ment for the purpose of changing	its registere	ed office or re	egistered agen	nt, or both,	in the State of Fi	orida.		
SIGNATURE .	Signature, typed or printed name of registe	red agent and title if applicable.						DATE		
9. Capital Contributions as Shown on record.  9. Capital Contributions in FLORIDA to date.		pital Contrib	outions					DEPT. OF STATE		
	A GENERAL PART	NER THAT IS A BUSINESS I	ENTITY M	UST BE RE	GISTERED	AND AC	TIVE WITH TH	IIS OFFICE.		
12.	GENERAL PA	ARTNER INFORMATION	13.	,			ADDRESS CH			二二
DOCUMENT <b>#</b> NAME	F01000005555 TCR HIGHLAND, INC.		STRE	ET ADDRESS	201 N.	New Y	ork Ave.	#200		(9/01
STREET ADDRESS CITY-ST-ZIP	717 North Harwood, S   Dallas TX 75201	SUITE 1200	CITY	ST-ZIP	Winter	Park,	FL 3278	39		CR2E003 (9/01)
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STREET ADDRESS City-St:3zip			CITY-	ST-ZIP					,****	$\dashv$
DOCUMENT /	. <del></del>	****	STREE	T ADDRESS						
STREET ADDRESS City-St-Zip				ST-ZIP						
- Indicated	on this report is true and accurate or trustee empowered to execute the control of the control o	ed with this filing does not qualify ate and that my signature shall have use this report as required by Chi	ve the same apter 620, F	legal effect : lorida Statute	ae it mada und	der oath; th	at I am a Genera	Partner of the	limited partnershi	n p or
	/ SIGNATURE AND A	YPED OR PRINTED NAME OF SIGNING GEN	ERAL PARTNE	1			Date	Daytim	e Phone #	1