LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B01 000 000 388

1. Entity Name: Lake's Edge Partners, LP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY -7 AM 9:48

LR 5/24

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: One Odell Plaza
Suite, Apt. #, etc.:
City & State: Yonkers, NY
Zip: 10701 Country:

3. Mailing Address: One Odell Plaza
Suite, Apt. #, etc.:
City & State: Yonkers, NY
Zip: 10701 Country:

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number: 65-0911940 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name: Registered Agents of Florida, LLC
Street Address (P.O. Box Number is Not Acceptable): 100 S.E. 2nd Street
Suite 3500
City: Miami FL Zip Code: 33131

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: $24,500.

10. Amount of Capital Contributions in FLORIDA to date: $24,500.

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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
P99 000 279 26	Lake's Edge Homes Holdings, Inc.	One Odell Plaza	Yonkers, NY 10701

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DO NOT WRITE IN THIS SPACE

CR2E003B (12/01)

STAPLE CHECK HERE

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: Karim Chowdhury — 4/24/02 — 914-964-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #