

**LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** B01000000439

1. Entity Name

CYPRESS CREEK INVESTMENTS, L.P. (LIMITED PARTNER

FILED

02 APR 11 AM 8:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**220 CONGRESS PK DR #215**

3. Mailing Address  
**220 CONGRESS PPK DR #215**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1**

City & State  
**DELFTY BEACH, FL**

City & State  
**DELRAY BEACH, FL**

4. FEI Number  
**88-0238005**

Applied For  
Not Applicable

Zip  
**33445** Country  
**USA**

Zip  
**33445** Country  
**USA**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
**SHEPHERD D JOHNSTON**  
Street Address (P.O. Box Number is Not Acceptable)  
**220 CONGRESS PK DR, SUITE 215**

**DELRAY BEACH, FL 33445**

City **FL** Zip Code **33445**

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. **\$60,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$17,000,000.00**

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 # NAME STREET ADDRESS CITY-ST-ZIP	<b>SUNBELT CORPORATE CENTER II, INC. 220 CONGRESS PARK DR, #215 DELRAY BEACH, FL 33445</b>	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	<b>200005289742--6 -04/17/02--01054--019 *****526.25 *****526.25</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	<b>DO NOT WRITE IN THIS SPACE</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	<b>DO NOT WRITE IN THIS SPACE</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	

CR2E003B (12/01)

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

**STEPHEN T. FALVEY, SENIOR VICE PRESIDENT - SUNBELT CORPORATE CENTER II, INC.**

SIGNATURE: *Stephen T. Falvey* **3/3/02** 561-265-1300