LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

U	NIFORM BUSIN	ESS REPO	RT (U	BR)	• 1		
DOCUMENT # B01000000439					FILED		
CYPRESS CREEK INVESTMENTS, L.P. (LIMI) PARTNER			
					1		
DO NOT WRITE IN THIS SPACE					SECRETARY OF STATE FALLAHASSEE. FLORIDA		
Principal Place of Business 3. Mailing Address					DO NOT WRITE IN THIS SPACE		
220 CONGRESS PK DR #215 Suite, Apt. #, etc.			220 CONGRESSPPK DR #215 Suite, Apt. #, etc.				
City & State City & State					DUE BY MAY 1 4. FEI Number Applied For		
DELFAY BEACH, FL DELR		DELRAY BEAC	AY BEACH, FL		88-0238005	Not Applicable	
33445	Country USA	33445	USA USA		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
		حیث این استی بنده بری <u>دگانات دی.</u>		Name	7. Name and Address of Current Registered	d Agent	
IN THIS SPACE				SHEPHERD Street Address (i	D_D_JOHNSTON (P.O: Box Number is Not Acceptable)		
					P.O. Box Number is Not Acceptable) RESS PKODR, SUITE 215		
				DELRAY BEACH, FL 33445			
· · · · · · · · · · · · · · · · · · ·					FL Zin 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.							
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 PARTNE		on the form	; an amendmen	t must be filed to change a general par	rtner.	
DOCUMENT/ NAME SUNBELT CORPORATE CENTER II, INC.			STREE	TREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	et address 220 congress Park Dr, #215			-ST-ZIP	y		
DOCUMENT #	DELRAY BEACH, FL 33	445			200005289	7426	
NAME STREET ADDRESS			STRE	ET ADDRESS	-04/17/020 ****526.25	1054019 ****526,25	
CITY-ST-ZIP	1			-ST-ZIP	***************************************		
DOCUMENT / NAME		·	STREE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY-	ST-ZiP	DO NOT WRITE		
DOCUMENT /			STREE	ET ADDRESS	IN THIS SPACE		
NAME STREET ADDRESS					THE THIS GLASE		
CITY-ST P	•		LIIT-	ST-ZIP			
DOCUME _{TO}			STREE	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			спу-	ST-ZIP			
DOCUMENT / NAME			STREE	T ADDRESS			
STREET ADDRESS CITY-ST-ZIP			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 STEPHEN T. FALVEY. SENIOR VICE PRESIDENT — SUNBELT CORPORATE CENTER II, INC.							
5612265_1300							
SIGNATURE: May / Jan / J							