

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

01/17/03 AI

DOCUMENT # B02000000023

1. Entity Name
SAND LAKE GENERAL PARTNER, L.P.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN 17 AM 11:29

MR
1/22

Principal Place of Business
**16910 DALLAS PARKWAY, SUITE 100
DALLAS TX 75248**

Mailing Address
**16910 DALLAS PARKWAY, SUITE 100
DALLAS TX 75248**



2. Principal Place of Business
1936 San Marco Blvd

3. Mailing Address
1936 San Marco Blvd

City & State
Jacksonville, FL

City & State
Jacksonville, FL

Zip
32207

Country
Duval

DUE BY MAY 1, 2003

4. FEI Number Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ROMANO, RICHARD
C/O CORNERSTONE MANAGEMENT & LEASING
1936 SAN MARCO BLVD.
JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **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 familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as Shown on record. **\$1,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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	BATHMAN, TROY 16910 DALLAS PARKWAY, SUITE 100 DALLAS TX 75248
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GISSLER, JAMES E 16910 DALLAS PARKWAY, SUITE 100 DALLAS TX 75248
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	000010190500 01717/03--01023--003 **141.25
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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

SIGNATURE: *[Signature]* **1-15-03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

CR2E03 (10/02)