

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVE  
AND  
FILED

0011986  
AT

DOCUMENT # **B93000000186**

1. Entity Name

**GORDON PROPERTY COMPANY, L.P., LTD.**

02 APR 22 PM 3:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business <b>23123 S. STATE ROAD 7, SUITE 301 BOCA RATON FL 33428</b>	Mailing Address <b>23123 S. STATE ROAD 7, SUITE 301 BOCA RATON FL 33428</b>
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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<b>DUE BY MAY 1, 2002</b>	
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4. FEI Number <b>43-1511295</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
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<b>GORDON, JAMES N 23123 S. STATE ROAD 7, SUITE 301 BOCA RATON FL 33428</b>
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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.

SIGNATURE	DATE
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9. Capital Contributions as Shown on record. <b>\$5,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.	11. <b>MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>
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**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	<b>GORDON, JAMES N</b>	STREET ADDRESS	
NAME	<b>23123 S. STATE ROAD 7, SUITE 301</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>BOCA RATON FL 33428</b>		
CITY-ST-ZIP			
DOCUMENT #	<b>GORDON, RUTH H</b>	STREET ADDRESS	
NAME	<b>23123 S. STATE ROAD 7, SUITE 301</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>BOCA RATON FL 33428</b>		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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:	<b>James N. Gordon</b>	4/8/02	(561) 451-0220
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CR2E003 (9/01)