

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B93000000372

1. Entity Name

INTRACOASTAL A LIMITED PARTNERSHIP

Principal Place of Business

Mailing Address

~~670 GOLDMAN SACHS & CO.~~

~~LEGAL DEPT.~~

~~100 CRESCENT COURT, #1000~~

~~600 E. LAS COLINAS BLVD., SUITE 1900~~

~~DALLAS TX 75201~~

~~IRVING TX 75060-6626~~

STET

FILED
May 02, 2000 8:00 am
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

13-3730411

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
STE. 105
TALLAHASSEE FL 32301

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$21,344,479.00

10. Amount of Capital Contributions
in FLORIDA to date.

21,344,479.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # F96000003212
NAME NEW INTRACOASTAL A CORP.
STREET ADDRESS 100 CRESCENT CT, STE. 1000
CITY - ST - ZIP DALLAS TX 75201

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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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

VICE PRESIDENT of the General Partner

4/28/2000

Date

Daytime Phone #

CFR 101.3 (1/99)