

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B93000000562

1. Entity Name

SAN MICHEL/RBG VIII L.P., LTD

01 MAY -2 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

6351 San Michel Way

6351 San Michel Way

Delray Bch, FL 33484

Delray Bch, FL 33484

2. Principal Place of Business

3111 University Drive

3. Mailing Address

3111 University Drive

Suite, Apt. #, etc.

#610

Suite, Apt. #, etc.

#610

City & State

Coral Springs, FL

City & State

Coral Springs, FL

Zip

33065

Country

Zip

Country

4. FEI Number

6500453816

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Peter M. Hodkin, P.A.

One E. Broward Blvd., Suite #1501

Fort Lauderdale, FL 33301

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 re-registering)

DATE

9. Capital Contributions
as Shown on record:

950,000

10. Amount of Capital Contributions
in FLORIDA to date:

200,000

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 # P96000072935
NAME Zuckerman Homes at the Polo Club
STREET ADDRESS 3111 University Dr. #610, Coral Spgs
CITY-ST-ZIP FL, 33065

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # F93000005754
NAME RBG VIII CORP.
STREET ADDRESS 154 W. Hubbard, Ste #250
CITY-ST-ZIP Chicago, IL 60606

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

(954) 340-1744

Date

Daytime Phone #

RECEIVED 03/01/01