

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVE
AND
FILED

02 MAR 18 AM 11:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **B9400000152**

1. Entity Name

HOMESTEAD COLONY LIMITED PARTNERSHIP

Principal Place of Business

2001 Bryan Street, #3700
~~717 NORTH HARWOOD, STE. 1200~~
DALLAS TX 75201

Mailing Address

2001 Bryan Street, #3700
~~717 NORTH HARWOOD, STE. 1200~~
DALLAS TX 75201



2. Principal Place of Business

2001 Bryan Street
Suite, Apt. #, etc.
Suite 3700

3. Mailing Address

2001 Bryan Street
Suite, Apt. #, etc.
Suite 3700

DUE BY MAY 1, 2002

City & State

Dallas TX

City & State

Dallas TX

4. FEI Number

75-2584415

Applied For

Not Applicable

Zip

75201

Country

USA

Zip

75201

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

SIGNATURE

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

DATE

9. Capital Contributions as Shown on record.

\$9,202,490.00

10. Amount of Capital Contributions in FLORIDA to date.

\$9,202,490.00

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 PARTNER INFORMATION

DOCUMENT # **B9400000151**
NAME **TCR HOMESTEAD COLONY LIMITED PARTNERSHIP**
STREET ADDRESS **717 NORTH HARWOOD, SUITE 1200**
CITY-ST-ZIP **DALLAS TX 75201**
1100 Congress Ave. #3700 Boca Raton, FL 33487

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

400005173304--2

-03/28/02--01004--021

*****526.25 ***526.25**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/14/02

Date

(561) 998-4451

Daytime Phone #

0016971 AT

CFR2E003 (9/01)

STAPLE CHECK HERE