

FILED

2003 JUL -8 PM 4:32

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # B9400000211					
1. Entity Name FOUNTAIN COURT ACQUISITION, LIMITED PARTNERSHIP					
Principal Place of Business C/O PLAY KNITS, INC. 240 WEST 40TH STREET NEW YORK, NY 10018			Mailing Address 30 COLUMBIA TURNPIKE C/O HMK ASSOC FLORHAM PARK, NJ 07932		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0479509	
				Applied For Not Applicable	
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	
LEE, FELIX H 2600 9TH STREET NORTH, SUITE 600 ST. PETERSBURG, FL 33704				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 date if applicable					
9. Capital Contributions as Shown on record. \$1,500,000.00			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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	F94000002988		STREET ADDRESS		
NAME	FOUNTAIN COURT MANAGEMENT CORP.		CITY - ST - ZIP		
STREET ADDRESS	240 WEST 40TH STREET		STREET ADDRESS		
CITY - ST - ZIP	NEW YORK, NY 10018		CITY - ST - ZIP		
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
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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: <u>James Smith</u>			JUNE - 27 - 03		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Day-Mo-Yr		

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