

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B96000000065

1. Entity Name

TRADE CENTER COMPLEX LIMITED PARTNERSHIP

Principal Place of Business
C/O GE ASSET MANAGEMENT
3003 SUMMER STREET
STAMFORD CT 06904

Mailing Address
C/O CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

FILED

02 APR 15 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

06-1451253

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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.

DATE

9. Capital Contributions as Shown on record.

\$26,007,149.41

10. Amount of Capital Contributions in FLORIDA to date.

26,007,149

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 # F96000000786
NAME BROWARD RPF III REALTY CORP.
STREET ADDRESS 3003 SUMMER STREET
CITY-ST-ZIP STAMFORD CT 06904

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

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

04-11-02

CR2E003 (9/01)



B96000000065

(2)

ACCOUNT NO. : 072100000032

REFERENCE : 526396 8630A

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 526.25

ORDER DATE : April 12, 2002

ORDER TIME : 11:49 AM

ORDER NO. : 526396-010

CUSTOMER NO: 8630A

BK

CUSTOMER: Mr. Fund Gerpiii
Ge Investment Co. (real Estate
Registered Agent Department
2711 Centreville Rd
Wilmington, DE 19808

FILED
02 APR 15 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

BK

NAME: TRADE CENTER COMPLEX LIMITED
PARTNERSHIP

RECEIVED
02 APR 15 PM 12:51
DIVISION OF CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 1114

EXAMINER'S INITIALS: _____