972-443-6000

Daytime Phone #

2/15/01 Date

2001	UNIFORM	BUSINESS	REPORT	(UBR)
	AIIII AIIII			()

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SCOTT H. RASKIN, ASSISTANT SECRETARY

1. Entity Name WESTERRA RIVER BRIDGE, L.P.					FIL	ED.	7) =		
Principal Place of Business 599 LEXINGTON AVE #3800 NY NY 10022		Mailing Address 3030 ŁBJ FREEWAY LB-6. SUITE 1500 DALLAS TX 75234		O1 FEB 28 AM II: 24 SECRETARY OF STATE					
2. Principal Place of Business		3. Mailing Address		- 13001301 1010 \$0\$10 87111 80131 80411 80511		B			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN	THIS SPACE				
City & State		City & State	City & State		4. FEI Number 13-3918663	· .	Applied For Not Applicable		
Zip	Country	Žip	Žip Country		5. Certificate of Status Desired	\$8.75 Fee Req	Additional uired		
	6. Name and Address of Curren	t Registered Agent			7. Name and Address of New Regist	ered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Name Street Address (P.O. Box Number is Not Acceptable)					
PLANTATIO	ON FL 33324			City	y FL Zip Code				
8. The above	a named entity submits this statement f	for the purpose of changing		red agent, or both, in the State of Florida.	<u> </u>				
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 Co as Shown	ontributions on record. \$8,700,000.00	10. Amount of Cap in FLORIDA to	oital Contri date.	butions \$2,592,83	4.33 11. MAKE CHECK PA SEE REVERSE SI	DE FOR FEE IN	1		
	A GENERAL PARTNER NOTE: General Partners M	THAT IS A BUSINESS E	NTITY M	UST BE REGIS' I: an amendmer	TERED AND ACTIVE WITH THIS OF the must be filed to change a general	FICE. il partner.			
			13.		ADDRESS CHANGES ONLY				
	WESTERRA RIVER BRIDGE, L.L.C. 599 LEXINGTON AVE., SUITE 3800			EET ADDRESS					
CITY-ST-ZIP DOCUMENT #	NEW YORK NY 10022								
NAME				EET ADDRESS					
STREET ADDRESS CITY+ST-ZIP			CITY	/-ST-ZiP					
DOCUMENT # NAME			STR	EET ADDRESS	70000380 -03/06/01 ****526.;)2817 - NI)33	74 -025		
STREET ADORESS CITY-ST-ZIP			CITY	Y-ST-ZIP	****526.7	25 ****	526.25		
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DOCUMENT #			STR	EET ADDRESS		1			
STREET ADDRESS CITY-ST-ZIP				/-ST-ZiP		± j			
indicated the recei	certify that the information supplied wid on this report is true and accurate an ver or trustee empowered to execute to Westerra River Bridg	id that my signature shall hav his report as required by Ch	ve the sam apter 620,	ie iegai епест as iт r Florida Statutes	ection 119.07(3)(i), Florida Statutes, I furth made under oath; that I am a General Par ity company	ner certify that t tner of the limite	ne information ad partnership or		