

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0021570 IN

DOCUMENT # B97000000309

1. Entity Name
RICHMOND NORSTAR USA, L.P.

FILED
SECRETARY OF STATE
OF CORPORATIONS

1/28

03 JAN 24 AM 9:38

Principal Place of Business
**621 COWBOYS PKWY., SUITE 200
IRVING TX 75063**

Mailing Address
**2180 STEELES AVENUE WEST, SUITE 305
CONCORD, ONTARIO CANADA L4K -2Z5**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

DUE BY MAY 1, 2003

4. FEI Number **75-2665750**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HENDERSON, THOMAS N III
HILL, WARD, & HENDERSON, BARNETT PLAZA
100 E. KENNEDY BLVD., SUITE 3700
TAMPA FL 33602**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

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

9. Capital Contributions as Shown on record. **\$990.00**

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	
DOCUMENT #	F97000003131
NAME	PLANO NORSTAR CORP.
STREET ADDRESS	621 COWBOYS PKWY., SUITE 200
CITY-ST-ZIP	IRVING TX 75063
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	100010575751
CITY-ST-ZIP	01/23/03--01080--004 **141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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 118.07(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: *NEIL BROWN* **SIGNATURE REQUIRED**

Date: _____ Daytime Phone #: **16163905-738-0754**

CR2E003 (10/02)