

APPROVED
AND
FILED

03 APR -2 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # B97000000452

1. Entity Name
CROCKER REALTY TRUST, L.P.



Principal Place of Business
15 EAST NORTH STREET
DOVER, DE 19903

Mailing Address
15 EAST DOVER STREET
DOVER, DE 19401-3609

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2003

4. FEI Number
65-0674892

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

GRAGG, K. LAWRENCE
200 SOUTH BISCAYNE BLVD., #4900
MIAMI, FL 33131

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

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

DATE

9. Capital Contributions
as Shown on record. \$43,000,000.00

10. Amount of Capital Contributions
in FLORIDA to date. 37,146,497.00

TO 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 # MS98000000333
NAME CRT-GP, LLC
STREET ADDRESS 433 PLAZA REAL, SUITE 336
CITY-ST-ZIP BOCA RATON, FL 33432

STREET ADDRESS 225 NE MIZNER BLVD., Suite 200
CITY-ST-ZIP Boca Raton, FL 33432

DOCUMENT #
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CITY-ST-ZIP

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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:

Todd J. Amara

3/25/03

561-395-9446

Todd J. Amara Asst. Sec. of G.P.

STAPLE CHECK HERE

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