

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0004149 AV

DOCUMENT # B97000000600

1. Entity Name
WINTHROP VENTURE FUND, LTD.



FILED

03 APR 15 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
318 N. CARSON STREET, STE. 208
CARSON CITY NV 89701-4269

Mailing Address
140 ROYAL PALM WAY, STE. 202
PALM BEACH FL 33480

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 86-0876845

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

METTLER, PETER W
140 ROYAL PALM WAY, STE. 202
PALM BEACH FL 33480

Name

Street Address (P.O. Box Number is Not Acceptable)

100016082141
04/15/03--01087--022 **526.25

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 title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$332,500.00

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 # F97000005061
NAME WINTHROP VENTURE MANAGEMENT, INC.
STREET ADDRESS 140 ROYAL PALM WAY, STE. 202
CITY-ST-ZIP PALM BEACH FL 33480

STREET ADDRESS

CITY-ST-ZIP

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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

Winthrop Venture Management, Inc.

General Partner,

4-7-03

SIGNATURE:

[Signature]

Earl T. Shannon its President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)

STAPLE CHECK HERE