


# 2002 UNIFORM BUSINESS REPORT (UBR)

0018780 AB

**DOCUMENT # B97000000640**

1. Entity Name  
**PORTFOLIO INVESTORS II, L.P.**

**FILED**  
**2002 APR 29 AM 11:06**  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA



Principal Place of Business <b>ONE BELMONT AVE., SUITE 401 GSB BUILDING BALA CYNWYD PA 19004</b>	Mailing Address <b>ONE BELMONT AVE., SUITE 401 GSB BUILDING BALA CYNWYD PA 19004</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

**DUE BY MAY 1, 2002**

4. FEI Number <b>23-2933901</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b> 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. <b>\$2,478,925.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>-\$2,478,925.00</b>	11. <b>MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>
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**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 # NAME STREET ADDRESS CITY-ST-ZIP	<b>F97000006090 BERGEN OF FLA-NJ, INC. ONE BELMONT AVE., SUITE 401, GSB BUILDING BALA CYNWYD PA 19004</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	<b>8899005502410--3 -05/10/02--01036--013 ****526.25 ****526.25</b>
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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]* **SIGNATURE REQUIRED**  
 By: **Portfolio Investors II, L.P.  
Bergen of FLA-NJ, Inc.**  
 Date: **4/25/02** Daytime Phone #: **(610) 668-2540**

CR2E003 (9/01)