

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 26, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # B97000000710**

1. Entity Name

ISLA CARROLL POLO, L.P.

Principal Place of Business

Mailing Address

1501 SEAMIST DR.

1501 SEAMIST DR.

HOUSTON

TX

77008

HOUSTON

TX

77008

2. Principal Place of Business

5065 WESTHEIMER ROAD

3. Mailing Address

5065 WESTHEIMER ROAD

Suite, Apt. #, etc.

840

Suite, Apt. #, etc.

840

City &amp; State

HOUSTON

TX

City &amp; State

HOUSTON

TX

Zip

77056

Country

Zip

77056

Country

4. FEI Number

76-0533855

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BYRD WADE R

MCCALL &amp; BYRD

340 ROYAL PALM WAY

PALM BEACH

33480

US

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

04/26/2001

DATE

9. Capital Contributions

as Shown on record. 1,500,000.00

10. Amount of Capital Contributions

in FLORIDA to date. 1,500,000.00

**11. MAKE CHECK PAYABLE TO 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 #  
NAME ISLA CARROLL POLO MANAGEMENT, L.L.C.  
STREET ADDRESS 1501 SEAMIST  
CITY-ST-ZIP HOUSTON TX 77008DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIPDOCUMENT #  
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STREET ADDRESS  
CITY-ST-ZIPDOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 5065 WESTHEIMER ROAD  
CITY-ST-ZIP HOUSTON TX 77056STREET ADDRESS  
CITY-ST-ZIPSTREET ADDRESS  
CITY-ST-ZIPSTREET ADDRESS  
CITY-ST-ZIPSTREET ADDRESS  
CITY-ST-ZIPSTREET 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:**

JOHN B. GOODMAN

MGRB

04/26/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)