

2001 UNIFORM BUSINESS REPORT (UBR)

001757 AF

DOCUMENT # B98000000016

1. Entity Name

JACK STRAW LIMITED PARTNERSHIP

Principal Place of Business

2601 S. BAYSHORE DRIVE, SUITE 300-A
MIAMI FL 33133-5413

Mailing Address

ONE GREENWAY PLAZA, SUITE 850
HOUSTON TX 77046

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0807701

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

COBER CORPORATE AGENTS, INC.
2601 SOUTH BAYSHORE DRIVE, 19TH FLOOR
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name
David A. Friedman

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

2601 S. Bayshore Drive Ste 300-A

City
Miami

FL

Zip Code
33133-5413

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$250,000.00

10. Amount of Capital Contributions in FLORIDA to date.

Same

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 # A97000002585
NAME LEF/PLAZA WEST, LTD.
STREET ADDRESS 2601 SOUTH BAYSHORE DRIVE, SUITE 300-A
CITY-ST-ZIP MIAMI FL 33133-5413

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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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. LEF/Plaza West, Inc., General Partner of LEF/Plaza West, LTD., General Partner of Jack Straw Limited Partnership

SIGNATURE: Sandra E. Ray, Secretary and Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

FILED

01 APR -4 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)