

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0005128 AT

DOCUMENT # B980000000066

1. Entity Name

MILAN - TEMPLE TERRACE PROPERTIES, LTD.

02 MAY 28 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

8035 EAST R.L. THORNTON FREEWAY, STE. 420
DALLAS TX 75228

Mailing Address

111 EAST 61ST STREET
NEW YORK NY 10021



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

City & State

4. FEI Number

75-2530518

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

DATE

9. Capital Contributions
as Shown on record.

\$990.00

10. Amount of Capital Contributions
in FLORIDA to date.

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

13. ADDRESS CHANGES ONLY

DOCUMENT # F98000000415
NAME SOMMERSET REALTY INVESTMENT CORPORATION
STREET ADDRESS 111 EAST 61ST STREET
CITY-ST-ZIP NEW YORK NY 10021

STREET ADDRESS

CITY-ST-ZIP

800005677808--9
-06/04/02--01069--002
****141.25 ****141.25

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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:

BOUCE SLOVIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/22/02

Date

212-588-1264

Daytime Phone #

CR2E003 (9/01)