

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0017586  
AT

DOCUMENT # B98000000114

1. Entity Name  
TERRAPIN STATION LIMITED PARTNERSHIP



FILED  
03 APR 30 AM 5:34  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Principal Place of Business  
ONE GREENWAY PLAZA  
SUITE 850  
HOUSTON TX 77046

Mailing Address  
ONE GREENWAY PLAZA, STE. 850  
HOUSTON TX 77046

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0807705

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

SHAPIRO, ROBERT L  
2627 IVES DAIRY ROAD  
SUITE 118  
AVENTURA FL 33180

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. 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. \$250,000.00

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 # A97000002575  
NAME LEF/SPRINGSGATE VILLAGE, LTD.  
STREET ADDRESS ONE GREENWAY PLAZA  
CITY-ST-ZIP HOUSTON TX 77046

STREET ADDRESS

CITY-ST-ZIP

800017543598

04/30/03--01022--008 \*\*535.00

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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/Springsgate Village, Ltd., general partner, LEF/Springsgate Village, Inc., general partner,

Sandra E. Ray, VP

SIGNATURE:

SIGNATURE REQUIRED

4/22/03

713-850-1850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (10/02)