

2002 UNIFORM BUSINESS REPORT (UBR)

0018439 AB

DOCUMENT # B98000000126

1. Entity Name
AP-ADLER, L.P.

FILED

02 JAN 25 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2 MANHATTANVILLE ROAD
PURCHASE NY 10577

Mailing Address
2 MANHATTANVILLE ROAD
PURCHASE NY 10577



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State
City & State

4. FEI Number 13-3980932
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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

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.

DATE

9. Capital Contributions as Shown on record. \$100.00

10. Amount of Capital Contributions in FLORIDA to date. \$100.00

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 # M98000000188
NAME AP-GP ADLER, LLC
STREET ADDRESS 2 MANHATTANVILLE ROAD
CITY-ST-ZIP PURCHASE NY 10577

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP 000004851630--6
-01731702--01089--008
****141.25 ****141.25

DOCUMENT #
NAME
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CITY-ST-ZIP

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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: *Ronald E. Solotruk* RECORDED Solotruk 1/24/02 914-694-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)