

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B98000000133

1. Entity Name

P-95/GLOBAL LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 25 AM 3:05

Principal Place of Business

4497 PARK DRIVE
NORCROSS GA 30093

Mailing Address

4497 PARK DRIVE
NORCROSS GA 30093-2908



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2375045

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

YERGLER, JON C
% LOWNDES DROSDICK DOSTER KANTOR & REED
215 NORTH EOLA DRIVE
ORLANDO FL 32801

Name
CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
City
Plantation FL Zip Code
33324

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)

Jeffrey R. Graves
Assistant Secretary

4/11/2000
DATE

9. Capital Contributions
as Shown on record.

\$7,099,929.00

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 # M98000000199
NAME WEEKS P-95, LLC
STREET ADDRESS 4497 PARK DRIVE
CITY - ST - ZIP NORCROSS GA 30093

STREET ADDRESS
CITY - ST - ZIP

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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.

By: Duke-Weeks Realty Corporation,
the general partner of Duke-Weeks Realty Limited Partnership, sole member of
Weeks P-95, LLC, general partner of P-95/Global Limited Partnership
SIGNATURE: Elizabeth C. Belden 770-717-3226
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
4/20/00
Daytime Phone #

CR2E003 (1/99)