200 <sup>-</sup>	UNIFOR	RM	BUSINI	ESS REPO	RT	(UBR	<b>i)</b>	
DOCU	00152				· Sec			
CROW COMMERCIAL REALTY INVESTORS						· 特代	F	ILED
Principal Place of Business 2100 MCKINNEY AVENUE. SUITE 700 DALLAS TX 75201			Mailing Address 2100 MCKINNEY AVENUE. SUI DALLAS TX 75201			SEC	MAY RET	
2. Principal Place of Business			3.	3. Mailing Address				I LOBILLE IDIO 18101 KOLI DOLI DOLI DOLI DOLI BOLI BELI BELI BELI DESAT ISBU 1819 KIN 1951
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE	
City & State			City & State			——————————————————————————————————————	4. FEI Number 75-2575038 Applied For Not Applicable	
Zip Country		try	Zip		Coun	try		5. Certificate of Status Desired See Required Fee Required
	6. Name and Ad	dress c	of Current Regist	Current Registered Agent			<u></u>	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET						Name Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525						City	FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its reg					egistere	ed office or r	egistere	ed agent, or both, in the State of Florida.
SIGNATURE								
Signature, typed or printed name of re			spistered agent and title if applicable. (NOTE: Reg  10. Amount of Capital Co in FLORIDA to date.			tributions  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.								
			L PARTNER INFORMATION			ADDRESS CHANGES ONLY		
DOCUMENT # F9700001732  NAME CROW FAMILY, INC.  STREET ADDRESS CITY-ST-ZIP DALLAS TX 75201			- 0.17	•	STRE	ET ADDRESS		
		*VENU	je, suite 700			-ST-ZIP		
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DOCUMENT NAME	11.2				STRE	ET ADDRESS		
STREET ADDRESS					OLTY	CT 710		

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

APR 2.4 200)

SIGNATURE:

Ronald S. Brown

SIGNATURE:

CITY-ST-ZIP

Vice President

APR 24 2001 214.66/8000