469-522-4200

Daytime Phone #

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B9800000255 1. Entity Name GRAND LAGOON ASSOCIATES, LTD.							ey * i	/	A	ž A
							FILED		U	
Principal Place of Business Mailing Address 10670 N. CENTRAL EXPRESSWAY. #600 10670 N. CENTRAL EXPRESS DALLAS TX 75231 DALLAS TX 75231			SWAY.	#600	O1 SEC	MAR 15 AM 11 RETARY OF STA AHASSEE, FLOR	TE			
2. Principal Place of Business 1800 Valley View lane Suite, Apt. #, etc. 3. Mailing Address 1800 Valley Suite, Apt. #, etc.					ew Lane	DO NOT WRITE IN THIS SPACE				
300 City & State Dallas, TX			City & State Dallas, TX			4. FEI Number 75-2759725 Applied For Not Applicable				ole
zip 75234	Zip Country 75234 Dallas 6. Name and Address of Current		75234 Co		try Dallas	1 a S 5. Certificate of Status Desired 7. Name and Address of New		Fee Re	Additional equired	
-16	6. Name and Address (or Current negisi	ered Agent		Name	7. 140110 0110 7	-	-		٦.
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street Address	ress (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324					City	FL Zip Code				
SIGNATURE .	named entity submits this st		applicable. (NOTE	: Registere	d Agent signature require			DATE	DT OF STATE	
9. Capital Contributions as Shown on record. \$10.00 In FLORIDA to date A GENERAL PARTNER THAT IS A BUSINESS ENTI					\$10	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION GISTERED AND ACTIVE WITH THIS OFFICE.				
	NOTE: General Par	rtners MAY NO	T be changed on th	e forn	; an amendme	nt must be filed	I to change a gener	al partner.		
12. GENERAL PARTNER INFORMATION DOCUMENT# F98000002299				13.	EET ADDRESS	ADDRESS CHANGES ONLY				
NAME STREET ADDRESS CITY-ST-ZIP					'-ST-ZIP	1800 Valley View Lane Dallas, TX 75234				
DOCUMENT # NAME	DINEE TO THE TOTAL			STR	EET ADDRESS	Darras	, 17 _ 7 0 5 0 1			180
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DOCUMENT # NAME				STR	EET ADDRESS		4444141	a factual		**************************************
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STREET ADDRESS CITY-ST-ZIP	certify that the information su	ipplied with this fil	ing does not qualify for	the eve	Y-ST-ZIP emption stated in S	Section 119.07(3)(i), Florida Statutes. I furt	ther certify tha	t the information	
indicated	for this report is true and ac ver or trustee empowered to	cureto and that m	w cianatura chali hava 1	no carr	A SOUTH OFFICE OF IT	made linder datu:	that I am a General Pa	rtner of the lin	nited partnership	or

ARI Florida Partners II, Inc. 2/27/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: