

2001 UNIFORM BUSINESS REPORT (UBR)

0015287 AF

DOCUMENT # B98000000256

1. Entity Name

GOVERNOR'S SQUARE ASSOCIATES, LTD.

FILED

MAR 15 AM 11:35

ny

Principal Place of Business

10670 NORTH CENTRAL EXPRESSWAY, SUITE 600
DALLAS TX 75231

Mailing Address

10670 NORTH CENTRAL EXPRESSWAY, SUITE 600
DALLAS TX 75231

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1800 Valley View Lane

3. Mailing Address

1800 Valley View Lane

Suite, Apt. #, etc.

300

Suite, Apt. #, etc.

300

City & State

Dallas, TX

City & State

Dallas, TX

4. FEI Number

75-2759726

Applied For

Not Applicable

Zip

75234

Country

Dallas

Zip

75234

Country

Dallas

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

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$10.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$10.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT # F98000002299
NAME ART FLORIDA PARTNERS II, INC.
STREET ADDRESS 10670 NORTH CENTRAL EXPRESSWAY, SUITE 600
CITY-ST-ZIP DALLAS TX 75231

STREET ADDRESS 1800 Valley View Lane
CITY-ST-ZIP Dallas, TX 75234

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 400003888264--9
CITY-ST-ZIP -03/20/01--01057--024
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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: *Robert A. Waldman* Robert A. Waldman, Secretary
ART FLORIDA PARTNERS II, INC. 2/27/01

469-522-4200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)