2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # B9800000341 VX-92355 1. Entity Name LINCOLN PROPERTY COMPANY NO. 2355 LIMITED PARTNE RSHIP Principal Place of Business Mailing Address					FILED			
					02 APR 29 PM 4: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA			7
								1505 FEDERAL
DALLAS TX 75	5201	DALLAS TX 75221						
				, ,				
2. Principal Pl	lace of Business	3. Mailing Address	3. Mailing Address			1 (4904) 1919 (1919) (2011 2010 0010 0010 8510 9510 9510 00106 (1)10 9165 (1911 (501		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 2002		
City & State	9	City & State	City & State		4. FEI Numbe	75-2766335	Applied For Not Applicat	20
Zip Country		Zip	Zip Cour		5 Certificate of Status Desired S8.75 Addit		\$8.75 Additional)ie
	6. Name and Address of Cur	Tent Registered Agent	Registered Agent		7. Name and Address of New Registered Agent			
				Name		<u>,</u>		
C T CORPORATION SYSTEM				Street Address (P.O. Box Number is Not Acceptable)				
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324								
PENNIAHON PE 35324				City FL Zip Code				
		A C. III						_
8. The above	named entity submits this stateme	ent for the purpose of changi	ing its registere	ea office or regist	ared agent, or both	i, in the State of Florida.		
SIGNATURE _	Signature, typed or printed name of registered	agent and title if applicable				DATE		
9. Capital Contributions 10. Amount of Capital Contributions					0	11. MAKE CHECK PAYA	BLE TO DEPT. OF STATE	
as Shown o	on record.	in FLORIDA ER THAT IS A BUSINES		UST BE BEGIS	STERED AND A		FOR FEE INFORMATION	
	NOTE: General Partners	MAY NOT be changed	on the form	; an amendme	nt must be file	i to change a general p	partner.	
12. DOCUMENT#	GENERAL PAR' F98000003082	TNER INFORMATION	13.			ADDRESS CHANGES C	DNLY	⊢£
NAME	LINCOLN PROPERTY 2355, INC.		STRE	ET ADDRESS			3(9)	
STREET ADDRESS CITY-ST-ZIP	1505 FEDERAL STREET DALLAS TX 75201		CITY	-ST-ZIP				CR2E003 (9/01)
DOCUMENT # NAME			STRE	### ##################################) 		
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DOCUMENT #		,	STRE	EET ADDRESS	+	****		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZiP				
indicatéd	certify that the information supplied on this report is true and accurate yer or trustee empowered (execu	and that my signature shall	have the same	e legal effect as if	Section 119.07(3)(i made under oath;	, Florida Statutes. I further of that I am a General Partner	certify that the information of the limited partnership	or

SIGNATURE:

Leigh Ann Everett

Asst Secretary \$\frac{10}{02} 214-740 \(\frac{4440}{0} \)

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