

2002 UNIFORM BUSINESS REPORT (UBR)

0018696 AB

DOCUMENT # B98000000555

1. Entity Name
CRF SPRINGS PLAZA LIMITED PARTNERSHIP

FILED

02 MAR -7 PM 4: 07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business C/O CONTINENTAL REALTY CORP. 17 WEST PENNSYLVANIA AVE., 5TH FLOOR TOWSON MD 21204	Mailing Address C/O CONTINENTAL REALTY CORP. 17 WEST PENNSYLVANIA AVE., 5TH FLOOR TOWSON MD 21204
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

DUE BY MAY 1, 2002

4. FEI Number 52-2105904	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent

**RYAN, JEAN A ESQ.
C/O BOND, SCHOENECK & KING, P.A.
4001 NORTH TAMiami TRAIL, SUITE 404
NAPLES FL 34103**

7. Name and Address of New Registered Agent

**Naples Lawdock, Inc. ✓
4501 Tamiami Trail North, Suite 300
Naples, Florida 34103-3060**

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 **John D. Humphreville, Vice President** *John D. Humphreville 2/2/02*

Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record. \$5,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. 4,250,000.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F98000005079 CRF SPRINGS PLAZA, INC. 17 WEST PENNSYLVANIA AVE., 5TH FLOOR TOWSON MD 21204
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13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	200005099412--6 -03/13/02--01031--021
CITY-ST-ZIP	****526.25 ****526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
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: *William H. Kinnear Jr.* **CRF Springs Plaza Inc**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **William H. Kinnear Jr.** Date **3/6/02** Daytime Phone # **410-296-4800**

CR2E003 (9/01)

STAPLE CHECK HERE