2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

B9800000555 DOCUMENT

1. Entity Name CRF SPRINGS PLAZA LIMITED PARTNERSHIP



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

APPROVE DMA FILED

03 MAR 10 AH 11: 13

SECRETARY OF STATE FALLEARINGSEE, FLOORIDA



2. Principal F	Place of Busin	ess /	3. Mailing Address) 8	IS BULLI BEIBI BIIDI DIIBI BIIL IBDI	
Suite, Apt. #, etc.			Suite, Apt. #, e	Suite, Apt. #, etc.			DUE BY MAY 1, 2003		
City & State			City & State	City & State			52-2105904	Applied For Not Applicable	
Zip Country		Zip	Zip Count		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			
NAPLES LAWDOCK, INC.					Name				
4501 TAMIAMI TRAIL N., SUITE 300					Street Address (P.O. Box Number is Not Acceptable)				
NAPLES FL 34103-3060									
74 1 220 1 2 0 1 100 0000									
					City		F	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. I am familiar with, and accept the obligations of registered agent.									
the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.							DATE	<u>;</u>	
9. Capital Contributions \$5,000,000,000 10. Amoun				of Capital Contrib	outions 4 los	50,0000	11. MAKE CHECK PAYABL	E TO FL. DEPT. OF STATE	
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					, an amendan	ent mast be mean	ADDRESS CHANGES O		
DOCUMENT #					ET ADDRESS				
NAME PERCET ADDRESS	AT LITTOT DELINIOUS LAND AND THE COL			SINE					
STREET ADDRESS CITY-ST-ZIP	**************************************				ST-ZIP .			ļ	
DOCUMENT#				стре	ET ADDRESS		·············		
NAME				SINEE	ET AUUNESS	500	<u> </u>	15.5	
STREET ADDRESS CITY-ST-ZIP	,			CITY-	ST-ZIP	03/10/0	301034020	**526.25	
DOCUMENT # NAME				STREE	ET ADDRESS	-			
STREET ADDRESS CITY-ST-ZIP				CITY-	ST-ZIP				
DOCUMENT #				STREE	ET ADDRESS		****		
STREET ADDRESS				CITY-	ST-ZiP				
CITY-ST-ZIP DOCUMENT #			. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CYPES	T 1000000	· · · · · · · · · · · · · · · · · · ·			
NAME				SINEE	T ADDRESS				
STREET ADDRESS CITY-ST-ZIP		17-17-1		CITY-	ST-ZIP		•		
DOCUMENT# NAME				STREE	T ADDRESS				
STREET ADDRESS CITY-ST-ZIP				CITY-S	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

CRF Spring Plaza Time., 6Ps

SIGNATURE: "

REBUILDING H. Kinnear Jr. V/P 2/26/03
ME OF SIGNING GENERAL PARTNER

Date