

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # B9800000707

1. Entity Name

Boca-Somerset, LP

02 JAN 23 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

c/o Investcorp

Suite, Apt. #, etc.

280 Park Avenue, 36West

City & State

New York, NY

3. Mailing Address

c/o Investcorp

Suite, Apt. #, etc.

280 Park Avenue, 36West

City & State

New York, NY

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number

13-4034861

Applied For

Not Applicable

Zip

10017

Country

USA

Zip

10017

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301

**DO NOT WRITE
IN THIS SPACE**

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

DATE

9. Capital Contributions

as Shown on record. \$11,000,000.00

10. Amount of Capital Contributions

in FLORIDA to date. \$11,000,000.00

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

DOCUMENT #

M98000001539

NAME

Boca-Somerset GP, LLC

STREET ADDRESS

c/o Investcorp 280 Park Avenue, 36 W

CITY - ST - ZIP

New York, NY 10017

STREET ADDRESS

300004831119--6

CITY - ST - ZIP

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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)(f), 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:

F. Jonathan Dracos

1-14-2002

(212) 599-4700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

F. Jonathan Dracos
V.Pot Boca-Somerset GP, LLC

Daytime Phone #

STAPLE CHECK HERE

CR2E003B (12/01)