

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

APPROVED
AND
FILED

DOCUMENT # *B98000000712*

1. Entity Name

WB Stage 16, L.P.

02 APR 30 PM 5:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

600 Payne Stewart Blvd

3. Mailing Address

200 South Orange Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2300 Box 112

DO NOT WRITE IN THIS SPACE

City & State

Windermere FL

City & State

Orlando FL

4. FEI Number

52-2125178

Applied For

Not Applicable

Zip

34786

Country

USA

Zip

32802-0112

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DUE BY MAY 1

7. Name and Address of Current Registered Agent

Name

A.G.C. Co.

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

200 South Orange Avenue

2300 SunTrust Center

City *Orlando*

FL

Zip Code

32801

**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.

200,000

10. Amount of Capital Contributions in FLORIDA to date.

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 #	NAME	STREET ADDRESS	CITY - ST - ZIP
<i>M98000001564</i>	<i>WB Stage 16, L.L.C.</i>	<i>600 Payne Stewart Blvd</i>	<i>Windermere, FL 34786</i>

STREET ADDRESS	
CITY - ST - ZIP	<i>000005501440--1</i>
	<i>-05/10/02--01001--026</i>
STREET ADDRESS	<i>*****535.00 *****535.00</i>
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

WB Stage 16, LLC by Tyler Pircey, its Manager

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

Glen Veeney 4/30/02

Daytime Phone #

407-876-5432

CR2E003B (12/01)

STAPLE CHECK HERE