2000 UNIFORM BUSINESS REPORT (UBR) B98000000722 DOCUMENT # 1. Entity Name CYPRESS CREEK PARK AND RIDE ASSOCIATES LIMITED P FILED OO APR 28 PM 4: 58 Principal Place of Business Mailing Address 200 SOUTH PARK ROAD, #200 -200 SOUTH PARK ROAD, #200-SECRETARY OF STATE HOLLYWOOD EL 33021-8541 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address 300 Hollywood Way 300 Hollywood Way Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 65-090881 APPLIED FOR Applied For City & State City & State Not Applicable Hollywood, Florida Hollywood, Florida Country \$8.75 Additional 5. Certificate of Status Desired ХX Fee Required USA 33021 33021 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name STOTZER, THEODORE R ESQ. Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH PARK ROAD, #200-300 Hollywood Way HOLLYWOOD FL 33024 City Hollywood 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. Ontributions S.A. Fred 436 (NOTE: Registered Agent signature required when reinstating) 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions SEE REVERSE SIDE FOR FEE INFORMATION 444,919:75 \$1,411,919.75 as Shown on record. in FLORIDA to date. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. F98000006851 DOCUMENT # STREET ADDRESS SREG PARK AND RIDE, INC. 300 Hollywood Way NAME 200 SOUTH PARK ROAD: #208 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33021 CITY-ST-ZIP 33021 Hollywood, Florida DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# 3209/00==01013 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 200008249803 DOCUMENT # STREET ADDRESS -05/19/00--MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME 600003243806--5 STREET ADDRESS CITY-ST-ZIP -05/09/00--01013--017 CITY-ST-ZIP ***2285.00 ****535.00 DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Stotzer, Exec. VI

4/25/00

(954) 981-1000

Date

Daytime Phone #