

# 2002 UNIFORM BUSINESS REPORT (UBR)

0006474 AT

DOCUMENT # B99000000117

1. Entity Name

DLJ-EWP LIMITED PARTNERSHIP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAY 16 PM 12:45



Principal Place of Business

C/O EAGLE HARBOR MANAGEMENT CORPORATION  
1880 EAGLE HARBOR PARKWAY  
ORANGE PARK FL 32073

Mailing Address

C/O EAGLE HARBOR MANAGEMENT CORPORATION  
1880 EAGLE HARBOR PARKWAY  
ORANGE PARK FL 32073

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

4. FEI Number

54-2002465

Applied For

Not Applicable

Zip

Country

Zip

Country

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

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD.  
SUITE 508  
MIAMI FL 33156-0000

Name

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

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

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

DATE

9. Capital Contributions as Shown on record.

\$100.00

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

13. ADDRESS CHANGES ONLY

DOCUMENT #	M99000000326
NAME	WINDSONG GP, LLC
STREET ADDRESS	277 PARK AVENUE
CITY-ST-ZIP	NEW YORK NY 10172
DOCUMENT #	M99000000354
NAME	WINDSONG MANAGEMENT, L.L.C.
STREET ADDRESS	1880 EAGLE HARBOR PARKWAY
CITY-ST-ZIP	ORANGE PARK FL 32073
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
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STREET ADDRESS	
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STREET ADDRESS	
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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

4/30/02 804-7393800

Date

Daytime Phone #

CR2E003 (9/01)