

2001 UNIFORM BUSINESS REPORT (UBR)

0010775 AF

DOCUMENT #	B99000000280
LELY GOLF VILLAS I LIMITED PARTNERSHIP	

FILED

Principal Place of Business 3185 HORSESHOE DRIVE, 1ST FLOOR NAPLES FL 34104	Mailing Address 3185 HORSESHOE DRIVE, 1ST FLOOR NAPLES FL 34104
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01 MAY 18 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 599 Lexington Avenue Suite, Apt. #, etc. Suite 3800 City & State New York, NY Zip 10022	3. Mailing Address 3030 LBJ Freeway Suite, Apt. #, etc. LB-6, Suite 1500 City & State Dallas, TX Zip 75234
Country USA	Country USA

4. FEI Number 59-3540447	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SOLOMON, A. JACK 3185 HORSESHOE DRIVE, 1ST FLOOR NAPLES FL 34104

7. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road City Plantation FL Zip Code 33324
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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 C. Morales Special Asst. Secretary 5/4/01 (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$1,500,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,500,000.00	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP	CITY-ST-ZIP

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	700004423467--5
CITY-ST-ZIP	-06/18/01--01007--021
CITY-ST-ZIP	****526.25 ****526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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 WESTBROOK LELY GOLF VILLAS I, L.L.C., a DE limited liability company, its GP

SIGNATURE:	5/8/01	972-443-6000
SCOTT H. RASKIN, Assistant Secretary	Date	Daytime Phone #

CR2E003 (11/00)