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2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 MAY 31 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B99000000337

1. Entity Name

Simpson Housing Limited Partnership

Principal Place of Business

10010 Belle Rive Blvd.
Jacksonville, FL 32256

Mailing Address

Attn: Angie Martinez
3201 S. Tamarac Dr.
Suite 200
Denver, CO 80231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

84-1320388

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions

as Shown on record. 100

10. Amount of Capital Contributions

in FLORIDA to date. 0

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 #

M99000001405

NAME

Paloma LLC

STREET ADDRESS

3201 S. Tamarac Drive, Suite 200

CITY- ST- ZIP

Denver, CO 80231

STREET ADDRESS

CITY- ST- ZIP

DOCUMENT #

NAME

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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

SIGNATURE:

See Attached

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

521-01

Date

303-283-4140

Daytime Phone #

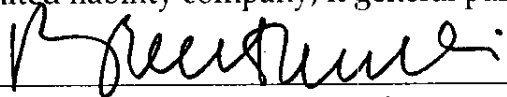
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Simpson Housing Limited Partnership, a Colorado limited partnership

By: Paloma LLC, a Colorado limited
limited liability company, its general partner

By: 
Brent W. Miller - Asst. General Manager