UN	IFOR	M BUSIN	ESS REPOR	L (ARK)			, , ,					
DÖCUI I. Entity Name SIMPSON	е	# B9900 G LIMITED PARTNERS	0000337 SHIP				-11E	D am 8:00	İ			
Principal Place 0010 BELLE F ACKSONVILLE			Mailing Address ATTN: ANGELA MARTINEZ 3201 S. TAMARAC DRIVE. #200 DENVER CO 80231 Otto Ongue Martin A Mailing Address		nly	SECRETARY OF STATE TALLAHASSEE, FLORIDA						
& OIK	.Un	ion ave	8110 g. Un	8110 E. Union auc			ÿ T		<u>.</u>			_
Suite Apt.	te 1	200	Suita Apt. # alc. 2	300 200		DUE BY MAY 1, 2003						
City & State Denvior, CO			Phys State Denuer	Denuer Co		4. FEI Number	84-1320	388		-	Applied For Not Applicable	,
802	0237 °USA		80231	COURTY		5. Certificate of Status Desired			\$8.75 Additional Fee Required			
	and Address of Curre	Name		7. Name and A	ddress of I	lew Registere	d Age	ent	•	_		
1201 HAY	ation ser' S street Ssee FL 32	VIČE COMPANY	ē.	Street A	ddress (P.O. Box Number i	is Not Acce	ptable)				_
TALLAHAS	SOCE FL 32	301-2323										_
		City		****	 	F	$=$ \perp	Zip Co		_		
	named entity ions of regist		t for the purpose of changing its i	registered office or	register	red agent, or both,	in the State	of Florida. Lar	m tarr	ıllıar witr	i, and accept	
SIGNATURE -	Signature typed	or printed name of registered ag	ent and title if applicable.					DATE	<u> </u>			
9. Capital Cor as Shown o	\$100.00	Il Contributions ate.	ibutions 11. MAKE CHECK PAYABLE TO FL. DE SEE REVERSE SIDE FOR FEE INFO						_			
	A (GENERAL PARTNEI	R THAT IS A BUSINESS ENT MAY NOT be changed on th	FITY MUST BE I	REGIST	TERED AND AC	TIVE WIT	HTHIS OFFICE a general p	CE. artn	er.		
12.		GENERAL PARTI	IER INFORMATION	13.				S CHANGES C				_
DOCUMENT #	M9900000 PALOMA	ЩC		STREET ADDRESS	8/1	108.1	lnic	n au	e	tt 21	70	
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14. Thereby 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