2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # B9900000358 1. Entity Name					FILED.	
TCR WORLD GATEWAY II LIMITED PARTNERSHIP				02 MAR -5, AM 9: 35		
Principal Place of Business Mailing Address 201 N. NEW YORK AVE SUITE 200 201 N. NEW YORK AVE SI WINTER PARK FL 32789 WINTER PARK FL 32789				00	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.					DUE BY MAY 1, 2002	
City & State City & State			·	/5-284HQ8/		Applied For Not Applicable
Zip Country		Zip	Zip Country			\$8.75 Additional Fee Required
	6. Name and Address of Curren	t Registered Agent		Nomo	7. Name and Address of New Registered A	igent
CORPORATION SERVICE COMPANY				Name		
1201 HAYS STREET TALLAHASSEE FL 32301-2525				Street Address ((P.O. Box Number is Not Acceptable)	
				City	FL	Zip Code
8. The above	named entity submits this statement f	or the purpose of changing its	s registere	d office or register	ed agent, or both, in the State of Florida.	•
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable.			DATE	
9. Capital Contributions as Shown on record. \$99.00 In FLORIDA to da				\$99.00 SEE REVERSE SIDE FOR FEE INFORMATION		
	0.11.000.0.1	In FLORIDA to a	ıate. фр	77.00	2FF KEAFH2F 2INF LAI	K FEE INFURMATION
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12.	A GENERAL PARTNER NOTE: General Partners M GENERAL PARTNE	THAT IS A BUSINESS EN AY NOT be changed on t	NTITY M	UST BE REGIST		tner.
12. DOCUMENT #	A GENERAL PARTNER NOTE: General Partners M. GENERAL PARTNE F99000004720 TCR GATEWAY, INC.	THAT IS A BUSINESS EN AY NOT be changed on t IR INFORMATION	NTITY Mithe form	UST BE REGIST	TERED AND ACTIVE WITH THIS OFFICE It must be filed to change a general par	tner.
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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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

TCR Gofeway . TIK

SIGNATURE:

Date Date** Date** Daytime Phone #*

Date** Daytime Phone #*

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