

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # B99000000437

1. Entity Name

NORTHFIELD 92 LIMITED PARTNERSHIP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

200 WEST MADISON STREET

Suite, Apt. #, etc.

25TH FLOOR

City & State

CHICAGO, IL

Zip

60606

Country

USA

3. Mailing Address

200 WEST MADISON STREET

Suite, Apt. #, etc.

25TH FLOOR

City & State

CHICAGO, IL

Zip

60606

Country

USA

DO NOT WRITE IN THIS SPACE

DUE BY MAY 1

4. FEI Number

36-4391543

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
CORPORATION SERVICE COMPANY

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

1201 HAYS STREET

City
TALLAHASSEE

FL

Zip Code
32301

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. \$198,000.00

10. Amount of Capital Contributions

in FLORIDA to date. Same

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

DOCUMENT # 384080
NAME LANSBROOK DEVELOPMENT CORPORATION
STREET ADDRESS 36330 US HWY 19 NORTH
CITY-ST-ZIP PALM HARBOR, FL 34684

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

100005024731--0
-02/27/02--01077--025
BK ****526.25 ****526.25

**DO NOT WRITE
IN THIS SPACE**

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:

Glen Miller, Vice President, 1/11/02 (312) 750-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

CR2E003B (12/01)