## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 24, 2002 8:00 am Secretary of State

04-17-2002 90023 024 \*\*\*\*50.00

DOCUMENT # L01000018722 1. Entity Name DUKE-WESTON IV, L.L.C. Principal Place of Business 600 EAST 96TH STREET, SUITE 100 3950 SHACKLEFORD ROAD, SUITE 300 INDIANAPOLIS IN 46240 DULUTH GA 30098 86334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 58-2660768 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number Is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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 primed name of registered agent and title if applicable. (NOTE: Registered Agent aigneture required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 1Ö. ADDITIONS/CHANGES MBR TITLE ☐ Delete me <u>8</u> ☐ Change ☐ Addition NAME NAME Duke Construction Limited CR2E083 STREET.ADORESS STREET ADDRESS Partnership CITY-ST-ZIP CITY-S1-709 3950 Shackleford , S t e . 300 □ Delete TITLE TITLE ☐ Chance ☐ Addition Duluth, GA 30096 NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-7/2 CITY-ST-7IP TITLE □ Delate ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TILE ☐ Deleta TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete MLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 managing member of manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. By: Duke Business Centers Corporation, some general partner of Duke Construction Limited Partnership, solles member of Duke-Weston IV, L.L.C.

SIGNATURE:

John R. Gaskin Sec GER, OR AUTHORIZED REPRESENTATIVE

770<u>-717-3200</u>