

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000001407

1. Entity Name

SC MIRAMAR GP, LLC

FILED

01 MAY -7 AM 11:47

Principal Place of Business

C/O GE CAPITAL INVESTMENT ADVISORS, INC.  
125 SUMMER STREET, SUITE 1270  
BOSTON MA 02110

Mailing Address

C/O GE CAPITAL INVESTMENT ADVISORS, INC.  
125 SUMMER STREET, SUITE 1270  
BOSTON MA 02110

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

980 Ninth Street

3. Mailing Address

980 Ninth Street

Suite, Apt. #, etc.

Suite 750

Suite, Apt. #, etc.

Suite 750

City & State

Sacramento, CA

City & State

Sacramento, CA

4. FEI Number

68-0463631

Applied For

Not Applicable

Zip

95814

Country

USA

Zip

95814

Country

USA

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

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: N.A.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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\*\*\*\*\*576.25 \*\*\*\*\*50.00

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Steven A. Grimshaw, Treasurer

03/08/01 916-874-9119

Date

Daytime Phone #