

# 2001 UNIFORM BUSINESS REPORT (UBR)

0026626 AF

**DOCUMENT # M98000001113**

1. Entity Name  
**3365 ENTERPRISE AVENUE INVESTORS LLC**

APPROVED  
AND  
FILED  
MAY -1 PM 5:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business UBS BRINSON REALTY INVESTORS LLC 242 TRUMBULL STREET HARTFORD CT 06103	Mailing Address UBS BRINSON REALTY INVESTORS LLC 242 TRUMBULL STREET HARTFORD CT 06103
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business c/o UBS Realty Investors LLC Suite, Apt. #, etc. 242 Trumbull St.	3. Mailing Address c/o UBS Realty Investors LLC Suite, Apt. #, etc. 242 Trumbull St.
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City & State Hartford, CT	City & State Hartford, CT	4. FEI Number <b>06-1526171</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip 06103-1212	Country	Zip 06103-1212	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>  CORPORATE SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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. (NOT) Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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

000004274310--4  
-05/21/01--01147--019  
\*\*\*\*\*350.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR UBS BRINSON REALTY INVESTORS LLC 242 TRUMBULL STREET HARTFORD CT 06103 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR URS Realty Investors LLC 242 Trumbull St. Hartford, CT 06103-1212 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Matthew H. Lynch UBS REALTY INVESTORS LLC, its Manager  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  
 Matthew H. Lynch, Secretary  
 Date: 4/4/01 Daytime Phone #: (860) 275-3920

CR2E083 (11/00)