2003 LIMITED PARTNERSHIP							
UNIFORM	BUSINESS REPORT	(UBR)					
DOCUMENT#	,A0000001114						

1. Entity Name VOGEL FAMILY PROPERTIES, LTD.

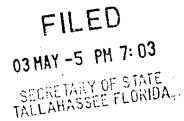
Principal Place of Business 586-BELLE POINT DRIVE

ST:-PETE-BEAGH-FL 33706

SIGNATURE:



Mailing Address
-386-BELLE-POINT DRIVE ST: PETE-BEACH_FL_33706



Daytime Phone #

,								
2. Principal F	Place of Business	3. Mailing Address	<u> </u>				(88(8) ((88) (188) (18) 8(8) (83)	
6210 BRANDON ST SOY WESTBO		2046H 19						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		!	DUE BY MAY 1, 2003			
City & State City & State SEET HAR		Bon FL		4. FEI Numbe	er 59-3658366	Applied For Not Applicable		
Zip 3341	Country	Zip 34695	Country		5. Certificate	of Status Desired	\$8.75 Additional Fee Required	
		7. Name and Address of New Registered Agent						
WILKINSON, G. BARRY			Namo BARRY J. VOGEL					
% LEFTER, CUSHMAN & WILKINSON, P.A.			Street Address (P.O. Box Number is Not Acceptable)					
696 FIRST AVE. NORTH, SUITE 201			SOY WESTBOLDUGH LA					
	RSBURG FL 33701		City				7in Code	
		7.		SA	FETY 1	HARBOR F	<u> </u>	
	named entity submits this statement for ions of registered agent.	the purpose of grangits re	egistered office or	register	ea agent, or bot	n, in the State of Florida. Tan	n tamiliar with, and accept	
SIGNATURE	Games DU				_	<u> 4/1/c</u>	73	
	Signature, typed or printed name a gistred lient ar	o me if a table.		g.		CATE		
Capital Contributions as Shown on record. Shown on record. Shown on record.			11. MAKE CHECK PAYABLE TO FL. DEPT. OF SEE REVERSE SIDE FOR FEE INFORMATION					
	A GENERAL PARTNER TO NOTE: General Partners MA							
12.	GENERAL PARTNER	INFORMATION	13.		ADDRESS CHANGES ONLY			
DOCUMENT #	L00000008400		STREET ADDRESS	1000				
NAME	VOGEL PROPERTIES, L.L.C.		-	اصا	710 PS	andoa ST		
STREET ADDRESS CITY-ST-ZIP	386 BELLE POINT DRIVE - ST. PETERSBURG FL 88796		CITY-ST-ZIP	W	JAG TEE	n BEACH, FL	33418-1489	
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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