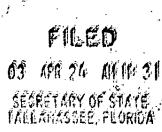
2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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THÉ ULLMAN FAMILY LIMITED PARTNERSHIP, LLLP



Principal Place of Business 1316 SOUTH HIGHLAND PARK DRIVE Mailing Address 1316 SOUTH HIGHLAND PARK DRIVE LAKE WALES FL 33898-7426 LAKE WALES FL 33898-7426





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2. Principal P	Principal Place of Business 3. Mailing Address							T NORTH IN THIS BENT HEN THEN BENT HEND HER TO BE THE THE THE THE THE THE THE THE THE TH					
Suite, Apt. #, etc. Suite, Apt. #, etc.		uite, Apt. #, etc.				DUE BY MAY 1, 2003							
City & State Cit		City & State			J3 J0/40 IV			Applied For Not Applicable					
Zip		Country	Zi	р	Coun	try	-	5. Certificate of Status Desired See Required Fee Required					
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent							
ULLMAN, DAVID C						Name .							
						Street Address (P.O. Box Number is Not Acceptable)							
1316 SOUTH HIGHLAND PARK DRIVE													
LAKE WA	LES FL 3385	33		•									
												1	
•						City	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. I am familiar with, and accept the obligations of registered agent.													
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.													
	Capital Contributions as Shown on record. \$44,760.00 10. Amount of Capital Contributions in FLORIDA to date					tributions 68.760 11. MAKE CHECK PAYABLE TO FL. DEPT.							
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					<u></u>	ADDRESS CHANGES ONLY						
DOCUMENT #													
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CITY-ST-ZIP					City								
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NAME					Jane	STREET ADDRESS							
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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

SIGNATURE: