	3 LIMITED PARM BUSINES			·	
DOCUMENT # A000001767 1. Entity Name STEAMBOAT VENTURES, LTD.				FILED 03 JAN 14 PM 2: 19	
Principal Place of Business 3301 OAK VISTA DRIVE DAYTONA BEACH FL 32124		Mailing Address 3301 OAK VISTA DRIVE DAYTONA BEACH FL 32124		SECRETARY OF STATE LALLAHASSEE, FLORIDA	
2. Principal Place of Business		3. Mailing Address			200 00000000000000000000000000000000000
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY MAY 1, 2003	
City & State		City & State		4. FEI Number 59-3677843	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Rec	Additional quired
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
FRIEDMAN, RICHARD A 3301 OAK VISTA DRIVE DAYTONA BEACH FL 32124			Street Address (P.O. Box Number is Not Acceptable) City Lip 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.					
9. Capital Contributions as Shown on record. \$450,000.00 10. Amount of Capital Cin FLORIDA to date			SEE REVERSE SIDE FOR FEE INFORMATION		
A NOT	GENERAL PARTNER THAT	IS A BUSINESS ENT	ITY MUST BE REGI e form: an amendm	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.	
12.	GENERAL PARTNER INFO		13.	ADDRESS CHANGES ONLY	
DOCUMENT # P99000071427 NAME STREET ADDRESS CITY-ST-ZIP DP9000071427 KLF REALTY, INC. 3301 OAK VISTA DRIVE DAYTONA BEACH FL 32124		STREET ADDRESS . CITY-ST-ZIP			
DOCUMENT # NAME			STREET ADDRESS	700010065617	75

STREET ADDRESS U1/14/U3==U1U1*C* CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZI DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP