

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0013996
AT

02 APR 25 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DUE BY MAY 1, 2002

DOCUMENT # A01000000309
1. Entity Name
580 KERWIN, LTD.

Principal Place of Business 2109 MEADOW BROOK DRIVE CLEARWATER FL 33759	Mailing Address 2109 MEADOW BROOK DRIVE CLEARWATER FL 33759
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

4. FEI Number 59-3697288	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**KERWIN, TIMOTHY J
2109 MEADOW BROOK DRIVE
CLEARWATER FL 33759**

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

9. Capital Contributions as Shown on record. \$7,500.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F08327 TRACKER CORP 2109 MEADOW BROOK DRIVE CLEARWATER FL 33759
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P00000101387 THE KERWIN DEVELOPMENT COMPANY, INC. 2109 MEADOW BROOK DRIVE CLEARWATER FL 33759
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Timothy J. Kerwin, Pres*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER: **TIMOTHY J. KERWIN, PRES
TRACKER CORP
GENERAL PARTNER**
Date: **Apr 22, 2002** Daytime Phone #: **(727) 799-5293**

CR2E003 (9/01)