412.578.

3/28 /2-003

## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

UN	ILOKM BOZINE	<u>:33</u> KEPUH	ti (c	JDK)			a 1	8
1. Entity Nam	MENT # A07089 AST ASSOCIATES, LTD.	9			SECF	FILED SETARY OF STATE N OF CORPORATIONS	Chy	<u>.</u>
Principal Place of Business C/O NATIONAL DEV. CORP.  4115 FIFTH AVE. PITTSBURGH PA 15213  Mailing Address C/O NATIONAL DEV. CORP.  4415 FIFTH AVE. PITTSBURGH PA 15213			RP.		03 APR -8 PM 12: 14			
Principal Place of Business     3. Mailing Address					- 			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 20	03	
City & State		City & State		4. FEI Number	25-1379721	Applied F		
Zip Country		Zìp	Country		5. Certificate of	Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New Registered	Agent	
				Name				
ASNBACHER, LEWIS 5150 BELFORT ROAD				Street Address (P.O. Box Number is Not Acceptable)				
BUILDING 100 JACKSONVILLE FL 32256				City FL Zip Code				
	named entity submits this statement foions of registered agent.	r the purpose of changing it	s registere	ed office or registe	red agent, or both,	in the State of Florida. I am	familiar with, and ac	cept
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable.				DATE		-
9. Capital Co as Shown		10. Amount of Capi in FLORIDA to a		outions		11. MAKE CHECK PAYABLE SEE REVERSE SIDE FO		
	A GENERAL PARTNER T NOTE: General Partners MA	Y NOT be changed on t	the form;			to change a general par	tner.	
12.	GENERAL PARTNER	RINFORMATION	13.			ADDRESS CHANGES ON	LY	
DOCUMENT # NAME STREET ADDRESS	WESTCO BUILDERS INC. 2902 59TH ST. W., STE. N BRADENTON FL		ı	ET ADDRESS	·		· · · · · · · · · · · · · · · · · · ·	CR2E003 (10/02)
CITY-ST-ZIP  DOCUMENT #			CITY-	-ST-ZIP		30154656	<u> </u>	RZE0(
NAME STREET ADORESS	NDC REALTY INVESTMENTS, INC 4415 FIFTH AVE.	<b>)</b> .	1	ET ADDRESS ST-ZIP		13-01036-010	**5 <u>35.00</u>	
DOCUMENT #	PITTSBURGH, PA		STREE	ET ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP		•	CITY-	ST-ZIP			· · · · · · · · · · · · · · · · · · ·	
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DOCUMENT # NAME STREET ADDRESS				ET ADDRESS			· .	
CITY-ST-ZIP				ST-ZIP				
indicated	ertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute this	that my signature shall have	the same	legal effect as if r	ection 119.07(3)(i), made under oath; th	Florida Statutes. I further cer lat I am a General Partner of	tity that the informat the limited partners	ion hip or