

2001 UNIFORM BUSINESS REPORT (UBR)

0017864 AF

DOCUMENT # A94000001700
 1. Entity Name
KNULL - WILLS, LTD.

FILED
 01 APR -9 PM 12:32

Principal Place of Business Mailing Address
749 NORTH MANASOTA KEY ROAD **749 NORTH MANASOTA KEY ROAD**
ENGLEWOOD FL 34223-9758 **ENGLEWOOD FL 34223-9758**

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number **65-0542471** Applied For
 Not Applicable

City & State City & State
 Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BAND, DAVID S
240 SOUTH PINEAPPLE AVE., TENTH FLOOR
SARASOTA FL 34236

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$657,142.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
 SEE REVERSE SIDE FOR FEE INFORMATION

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

13. ADDRESS CHANGES ONLY

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	KNULL, WILLIAM H JR.	5525 YORKTOWN BLVD.	ARLINGTON VA 22207-1552
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	KNULL, WILLIAM H., JR TRUSTEE	5525 YORKTOWN BLVD.	ARLINGTON VA 22207-1552
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	KNULL, WILLIAM H III	406 FALL RIVER ROAD	HOUSTON TX 77024
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	KNULL, KENNETH M	222 E. HIGHVIEW DR.	LANCASTER VA 22503
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	WILLS, CARROLL JEANNE	4138 N.W. 31ST TERRACE	GAINESVILLE FL 32605
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

STREET ADDRESS	
CITY-ST-ZIP	900004009739--7
STREET ADDRESS	--04/16/01--01028--004
CITY-ST-ZIP	***526.25 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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: *William H. Knull, Jr.*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

April 2, 2001 707/536-5715
 Date Daytime Phone #

CR2E003 (11/00)