

**2003 LIMITED PARTNERSHIP  
UNIFORM BUSINESS REPORT (UBR)**

**MJH**

**FILED**

03 MAY -6 PM 8:47

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



**DOCUMENT # A99000001875**

1. Entity Name  
**BEHN PROPERTIES, LTD.**



Principal Place of Business  
3608 WILDER LANE  
ORLANDO, FL 32804

Mailing Address  
P.O. BOX 540238  
ORLANDO, FL 32854

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
3608 Wilder Lane  
Suite, Apt. #, etc.

City & State  
Orlando, FL

Zip Country  
32804 US

**DUE BY MAY 1 2003**

4. FEI Number  
59-3644342

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**BEHN, JEROME G  
3608 WILDER LANE  
ORLANDO, FL 32804**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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

9. Capital Contributions as Shown on record. **\$638,197.56**

10. Amount of Capital Contributions in FLORIDA to date. **\$638,197.56**

**MAKE CHECK PAYABLE TO FL 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 |                   |
|---------------------------------|-------------------|
| DOCUMENT #                      | LS9000007718      |
| NAME                            | BEHN, LLC         |
| STREET ADDRESS                  | 3608 WILDER LANE  |
| CITY - ST - ZIP                 | ORLANDO, FL 32804 |
| DOCUMENT #                      |                   |
| NAME                            |                   |
| STREET ADDRESS                  |                   |
| CITY - ST - ZIP                 |                   |
| DOCUMENT #                      |                   |
| NAME                            |                   |
| STREET ADDRESS                  |                   |
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| NAME                            |                   |
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| CITY - ST - ZIP                 |                   |
| DOCUMENT #                      |                   |
| NAME                            |                   |
| STREET ADDRESS                  |                   |
| CITY - ST - ZIP                 |                   |

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

CR2E003 (10/02)

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:** *Jerome G. Behn* **BEHN, LLC, by JEROME G. BEHN, MGRM**

Date **5/1/03** (407) 649-1433

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER