2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A0000001573 1. Entity Name						
RISTELLO I LIMITED PARTNERSHIP				FILED		
Principal Plac	e of Business	Mailing Address		01	MAR 15 PM 12: 05	
5538 DINAH LANE SARASOTA FL 34231		7530 S. TAMIAMI TRAIL #86 SARASOTA FL 34231 TAI		SE TAI	ECRETARY OF STATE ALLAHASSEE, FLORIDA	
2. Principal Place of Business 3. Mailing A		3. Mailing Address	failing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number 65-1041919 Applied For Not Applicable	
Zip	Country	Zip	Country	:	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent	Name		7. Name and Address of New Registered Agent	
FASANELLI, RICHARD A 5538 DINAH LANE SARASOTA FL 34231				Street Address (P.O. Box Number is Not Acceptable)		
SANASOTA FL 34231			City	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						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE OF CONTROL OF THE PROPERTY OF STATE						
as Shown on record. In FLORIDA to date. 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	FASANELLI, RICHARD A 5538 DINAH LANE		STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34231		CITY-ST-ZIP		- 600003888136 7	
DOCUMENT # NAME STREET ADDRESS	STELLA LOUISE GRAY		STREET ADDRESS		-03/20/0101041011 ****150.00 ****150.00	
CITY-ST-ZIP	5538 DINAH LANE SARASOTA FL 34231		CITY-ST-ZIP			
DOCUMENT # NAME STREET ADDRESS			STREET ADDRESS	····		
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NAME STREET ADDRESS CITY-ST-ZIP	. : . :	į	STREET ADDRESS CITY-ST-ZIP			
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DOCUMENT # 1			STREET ADDRESS			
STREET ADD ESS CITY-ST-ZIP			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						