2003 LIMITED PARTNERSHIP

UN	IFUH	M ROSIN	F22 KFLOH	ii (U	BK)		, , ,		
DOCUMENT # A0000001962 1. Entity Name THE LUBECK III FAMILY LIMITED PARTNERSHIP						03	FILED NAY -7 PH 1:	30	
Principal Plac 1250 N OCEAI SINGER ISLAN	N DR	s	Mailing Address 1250 N OCEAN DR SINGER ISLAND FL 33404			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Address Address									
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003			
City & State			City & State		<u> </u>	0051001721		Applied For Not Applicable	
Zip		Country	Zip	Country	ý	5. Certificate	of Status Desired		75 Additional Required
Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent			
LUBECK, GEORGE FRANCIS JR					Name Street Address (P.O. Box Number is Not Acceptable)				
1250 N OCEAN DR						, .o. dox realition is real recording to			
SINGER ISLAND FL 33404					City	City Pa Zip Code			
the obligati	ions of regist		for the purpose of changing its	s registered	office or registe	ered agent, or both	-		ar with, and accept
9. Capital Contributions as Shown on record. \$34,000.00 In FLORIDA to date					utions		11. MAKE CHECK PAYAI SEE REVERSE SIDE		
			THAT IS A BUSINESS EN AY NOT be changed on t						
12.		GENERAL PARTNE		13.			ADDRESS CHANGES		
DOCUMENT # NAME	LUBECK, GEORGE FRANCIS, JR., TRUSTEE 728 ROBIN WAY NORTH PALM BEACH FL 33408			STREET	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-ZIP	900018462469 05/07/0301094012 **326.75			
DOCUMENT # NAME	DRESS IP				STREET ADDRESS US/10/7/U3011/094012 **326. 75 CITY-ST-ZIP			826 . 75 	
STREET ADDRESS CITY-ST-ZIP									
DOCUMENT # NAME				STREET	ADDRESS				
STREET ADDRESS CITY-ST-ZIP				CITY-S	T-ZIP		·		
DOCUMENT # NAME STREET ADDRESS			٠	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	T-ZIP	, , , , , , , , , , , , , , , , , , ,	,	<u>-</u>	
NAME STREET ADDRESS	1				ADDRESS	<u> </u>			
CITY-ST-ZIP.				CITY-S	T-ZIP				
NAME STREET ADDRESS					ADDRESS				· · · · · · · · · · · · · · · · · · ·
	ì			CITY-S	T-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

CEORGE

TRUSTEG

SIGNATURE:

SIAPLE UMEUN MENE