2003 LIMITED PARTNERSHIP

DOCUMENT # A0200001426 1. Entity Name ALTMAN FAMILY PROPERTIES, LTD.					FILED 03 JAN -8 PM 2:58
Principal Place of Business 7152 SOUTH SHORE DRIVE ST. PETERSBURG FL 33707 Mailling Address 7152 SOUTH SHORE DRIVE ST. PETERSBURG FL 33707					SECRETARY OF STAIC TAEEAHASSEE.FLORIDA
2. Principal Place of Business 12005 - 5 + 5 + ect 8. 12005 - 5 + Suite, Apt. #, etc. Suite, Apt. #, etc.			41 5	reet E.	
()					DUE BY MAY 1, 2003
			Islan	d	4. FEI Number Applied For Not Applied For Not Applied For
33706 USA 33706			Country	A	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent
BACON,	DAVID A		. ,	Name	
2959 FIRST AVENUE NORTH				Street Address (P.O. Box Number is Not Acceptable)	
ST. PETERSBURG FL 33713					
•				City 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 according to the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.					
9. Capital Contributions \$400.00 10. Amount of Capital Contributions				ons	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
as Shown on record. 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				ADDRESS CHANGES ONLY
DOCUMENT # NAME	ALTMAN, CHARLES			ODRESS	•
STREET ADDRESS	7152 SOUTH SHORE DRIVE				
CITY-ST-ZIP	ST. PETERSBURG FL 33707		CITY-ST-2	ZIP .	
DOCUMENT # NAME	ALTMAN, ETHEL 5 7152 SOUTH SHORE DRIVE ST. PETERSBURG FL 33707			ADDRESS 600009949416	
STREET ADORESS CITY-ST-ZIP				tiP	01/08/03-01034-004 **141.25
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STREET ADDRESS	ADDRESS				
CITY-ST-ZIP.	IP.		CITY-ST-Z	IP	
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DOCUMENT # NAME			STREET ADD	DRESS	7-9
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZI	i i	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-6-03 727-360-0697
Date Dayling Phone #