DOCUI 1. Entity Nam	MENT # A0446	9				:	Ell Fi	7			-
-	NO. 1, LTD.					DIV	EILEI SEGRETARY 6 ISION OF COR	F STATE PORATION	S		
							D MAY - 1 A		•		
Principal Plac	#200			tur i	Ziini 1 A	1110-33					
_TAMPA_FL_33607.59\$5+						•					
	•		-								
2. Principal P	~ G		Gue	i tilinin		#111# 1411 WIBIT #11					
Suite, Apt.	/	1		DO NOT WRITE IN THIS SPACE							
City & State	e	City& State				4. FEI Numb	er 59-174846	 i6		Applied For Not Applicable	<u>,</u>
Jamp Zip	Country	Zip Zip	Coun	try		5. Certificate	e of Status Desired		8.75	Additional	7
3360	6. Name and Address of Current R	33607 teglstered Agent		214		7. Name and	d Address of New		ee Requ gent	ili ea	_
VDUOTN	M A ID	• •		Name	· • =	بد. د-	۔ يب مي ۔	- 13m 1		_ /	_
KRUSEN, W A JR. -2907-BAY-TO-BAY-BLVD., #200 -				Street Address (P.O. Box Number is Not Acceptable)							_]
-TAMPA-FL-33829				50,7	to 1	120	7	7			
				City-T	- - -	99		FL	Zip C	6 07	
8. The above	named entity submits this statement for	the purpose of changing its re	egistere				th, in the State of F	lorida.		,	7
SIGNATURE .	Wakuml	w. A.	. , K.	(-3と)、	Jr.			3-29-	00		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re 9. Capital Contributions \$80,000.00 10. Amount of Capital Contributions 10. Amount of					re required	when reinstating)	11. MAKE CH				\dashv
as Shown		in FLORIDA to dat	e.		PEGIST	EDED AND		RSE SIDE FOR		ORMATION	_
	NOTE: General Partners MA	/ NOT be changed on the	form	; an ame	ndment	must be file	ed to change a	general part	ner.		_
12.	GENERAL PARTNER	INFORMATION	13.				ADDRESS C	HANGES ONL	<u>Y</u>		- 66 66
NAME	GENERAL MGMT & DEVELOPMENT CORP.			ET ADDRESS	7650	Courtne	ry Complor	Couy.	<u>, 11</u>	<u>20</u>	(6) (8)
STREET ADORESS CITY-ST-ZIP	1907 BAY TO BAY BLVD., #200 TAMPA FL 93629			-ST-ZIP	Ta	mpa,	FC 33	607			CR2E003 (9/99)
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NAME STREET ADDRESS CITY-ST-ZIP			СПҮ	'∙ST-ZBP		_		_	-		
14. I hereby	L certify that the information supplied with on this report is true and accurate and t	that my signature shall have th	ne sam	e lecal ette	ct as it m	ction 119.07(3) ade under oat)(i), Florida Statute h; that I am a Gene	s. I further cert eral Partner of	ify that th	ne information d partnership o	or
the receiv	ver or trustee empowered to execute this	report as required by Chapte	o20,	riorida Stat	เนเษร						ĺ

813-837-3009

3-29-00 Date

SIGNATURE ARE GUINARIAN SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: