2003 LIMITED PARTNERSHIP

UN	IFOR	M BUSINI	ES:	S REPOR	T (l	JBR)	_				
DOCUMENT # A12848 1. Entity Name WOODWINDS ASSOCIATES, LTD., LIMITED PARTNERSHIP							FILED 03 SEP -2 AH 9: 25				
							03 9	SED - S HILL			
C/O WINGATE DEVELOPMENT CORP. C/O V 13 KENDRICK STREET, ONE CHARLES RIVER PLC 63 KEI				D WINGATE DEVELOPMENT CORP. KENDRICK STREET. ONE CHARLES RIVER PLC EDHAM MA 02494				CRETARY OF STA			
2. Principal Place of Business				3. Mailing Address			9/2	[]	(i didi e d ii	iii than gian aidh can	
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DUE BY SEPTEMBER 24, 2003				
City & State			1	City & State			4. FEI Number 04-2771156 Applied For Not Applicable				
Zip	Country			Zip Cour		itry		5. Certificate of Status Desired Fee Requ		75 Additional Required	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name				nt	
WINGATE MANAGEMENT COMPANY, INC. C/O WOODWINDS APARTMENTS							treet Address (P.O. Box Number is Not Acceptable)				
1800 WOODWINDS DRIVE BRADENTON FL 34208						City FL Zip Code				Zip Code	
 The above named entity submits this statement for the purpose of changing its re the obligations of registered agent. 					register	<u></u>	ered agent, or both		<u> </u>	<u>'</u>	
	lions of region	юю адоль									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.								DA			
9. Capital Contributions as Shown on record. \$874,175.00 In FLORIDA to date						\$ 0.0 SEE REVERSE SIDE FOR FEE INFORMATION					
		GENERAL PARTNER : General Partners Ma									
12.	OFFICE 1	GENERAL PARTNE	RINFO	RMATION	13.			ADDRESS CHANGES	ONLY		
DOCUMENT # NAME STREET ADDRESS	856051 CONTINENTAL WINGATE CO. OF 3833 PEACHTREE ROAD, N.E. ATLANTA GA 30319			GEORGIA, INC.		EET ADDRESS	·				
CITY-ST-ZIP						-ST-ZIP					
DOCUMENT # NAME	856052 WINGATE DEVELOPMENT CORP 63 KENDRICK STREET, ONE CHARLES RIVER PLC NEEDHAM MA 02494					STREET ADDRESS 09/02/0301050003 **541,25					
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STREET ADDRESS CITY-ST-ZIP		- <u></u>			CITY	-ST-ZIP					

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 781-707

SIGNATURE:

SINGLEYONEON MEKE