2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

A16986 DOCUMENT # BLÚMBERG CRESTVIEW MOTEL, LTD. Principal Place of Business 2733 ROSS CLARK CIR. Mailing Address P.O. BOX 5566 DOTHAN AL 36302 DOTHAN AL 36301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2003** City & State City & State 4. FEI Number Applied For 63-0871362 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PARKER, DAVID KEN Street Address (P.O. Box Number is Not Acceptable) 405@ FERDON BLVD. CRESTVIEW FL 32536 City Zip Code 8. The above with 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 accept the obliga SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$4,000.00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ADDRESS BLUMBERG, LARRY G. NAME 3002 FOXRIDGE RD STREET ADDRESS 200015436752 CITY-ST-ZIP DOTHAN AL CITY-ST-ZIP 04/07/03 - -01067 - -025DOCUMENT # STREET ADDRESS BLUMBERG, RICHARD H. NAME 1123 APPIAN WAY CIR STREET ADDRESS CITY-ST-ZIP DOTHAN AL CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP City-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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:

CR2E003 (10/02)