2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

A19052 **DOCUMENT#**

1. Entity Name

FINANCIAL DEVELOPMENT COMPANY, LTD.



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TORETARY OF STATE

Principal Place of Business 1309 TIMBER LANE BOULDER CO 80304 Mailing Address 1309 TIMBER LANE BOULDER CO 80304 BOULDER CO 80304								SECRETARY TALLAHASSEE FLORIDA			
2. Principal Place of Business 3. Mailing Address					19.0		7 4/1	1801 11010 18111 BE181 BILL	1	8/8/1 #18() 8/9() B18() 1881	
Suite, Apt. #, etc.				Suite, Apt. #, etc.		· · · · · ·	1.11	DUE BY MAY 1, 2003			
City & State			,	City & State			4. FEI Numbe	4. FEI Number 95-3168526 Applied For Not Applied For		Applied For Not Applicable	
Zip	Zip Country			Zip	ntry	5. Certificate	of Status Desired		8.75 Additional see Required		
6. Name and Address of Current Registered Agent							7. Name and	Address of New Re	gistered Ag	ent	
LASHER, ANNE						Name Street Address (P.O. Box Number is Not Acceptable)					
3402 BIMINI LANE, APT. C-2 COCONUT CREEK FL 33066						Sirett Address	S (T.O. DOX NUMBER	na Not Acceptable)			
						City			FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or being in the State of Florida am familiar with, and accept the obligations of registered agent. 104/17/0301078025 **141.25											
SIGNATURE -	Signature, typed	or printed name of registered age	nt and title i	f applicable.					DATE		
9. Capital Contributions as Shown on record. \$20,000.00 10. Amount of Capital C in FLORIDA to date.						butions \$ 100	13.00		PAYABLE TO	FL. DEPT. OF STATE EE INFORMATION	
		GENERAL PARTNER								er	
NOTE: General Partners MAY NOT be changed on the form; an a series of the form; and a series of the series of the form; and a series of the series of th							ent mast be met	ADDRESS CHA			
DOCUMENT # NAME	AME LASHER, MARTIN TREET ADDRESS 1309 TIMBER LANE				STRE	EET ADDRESS				CB2F003 (10/02)	
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NAME STREET ADDRESS					STRE	EET ADDRESS					
CITY-ST-ZIP	ertify that the	information supplied wi	th this fil	ing does not qualify fo		-ST-ZIP	Section 119 07(9)(i)	Florida Statutos 1:	further certify	that the information	

I hereby certify that the information supplied with this filling 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 accirate 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 of required by Chapter 620, Florida Statutes

SIGNATURE: