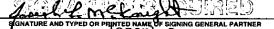
2002 UNIFORM BUSINESS REPORT (UBR)

A22333 **DOCUMENT #** FILED 02 MAY - 1 AM 11: 32 SPACE AGE INVESTMENT CLUB, A LIMITED PARTNERSHIP SECRETARY OF STATE TALLAHASSEE. FLORIDA Principal Place of Business Mailing Address 6512 RIDGE CT. 6512 RIDGE CT. TITUSVILLE FL 32780 TITUSVILLE FL 32780 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** City & State City & State 4. FEI Number Applied For 59-2789144 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent .. w. 19.0 MCKNIGHT, JOSEPH L. Street Address (P.O. Box Number is Not Acceptable) 6512 RIDGE COURT TITUSVILLE FL 32780 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. 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 DEPT. OF STATE \$51.061.00 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION \$40,121.00 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 DOCUMENT # STREET ADDRESS MCKNIGHT, JOSEPH & JUDY NAME 6512 RIDGE COURT STREET ADDRESS CITY-ST-ZIP TITUSVILLE FL CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 800005554838--4 -05/16/02--01041--016 CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # ****375.75 ****375.75 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP C/TY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST. ZIP

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



April-25-2002