2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT #	A26536	

1. Entity Name

STÍRLING ROAD PLAZA, LTD.



Principal Place of Business %KONOVER & ASSOCIATES SOUTH LLC 7000 W. PALMETTO PARK RD., #408 **BOCA RATON FL 33433**

Mailing Address ***
KONOVER & ASSOCIATES SOUTH LLC 7000 W. PALMETTO PARK RD., #408 **BOCA RATON FL 33433

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Suite, Apt. #, clc. Suite, Apt. #, clc. Suite City & State	2. Principal Place of Business		3. Mailing Address		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	— I KODICELI HAID TIBER AULET BEIND BEIND BEIN DICHT GEBEN GEGEN DEUT DEGEN HÄDET.				
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CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE F1, 32301-2525 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature 9. Capital Contributions \$792,000-00 10. Annount of Capital Contributions in FLORIDA to date. \$792,000-00 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SER REVERSE SIDE FOR FEE INFORMATION A CREMERAL PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. OCCUMENT / NAME STREET ADDRESS CITY-ST-ZIP COCUMENT / NAME STREET ADDRESS CITY-ST-ZIP COCUMENT / NAME STREET ADDRESS CITY-ST-ZIP COCUMENT / NAME STREET ADDRESS CITY-ST-ZIP COMMENT / NAME	City & State			City & State	City & State		4. FEI Number	65-0110296		
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B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE 9. Capital Contributions	TALLAHA	SSEE FL 32	2301-2525							
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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 empoyered to execute this report as required by Chapter 620, Florida Statutes

Florida K-Five Corporation, its General Partner by: Kristen M. Mirrione, its Treasurer 56/-344-422

SIGNATURE