Sol-659-3060

2003 LIMITED PARTNERSHIP

SIAPLE CHECK HERE

SIGNATURE: _

UN	IFORM	BUSINE	SS REP	ORT (JBR)				8
DOCU 1. Entity Nam TFLP, L1		A27806				03 #	FILED	30	¥
Principal Place of Business P. O. BOX 2973 PALM BEACH FL 33480			Mailing Address P. O. BOX 2973 PALM BEACH FL 33480			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
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 65-01	77984	Applied For Not Applicab	le
Zip Country			Zip Coun		try	5. Certificate of Status	Fe	8.75 Additional ee Required	
	6. Name and	Address of Current F	egistered Agent		Name	7. Name and Address	of New Registered Ag	ent	_
HERON, J E 232 AUSTRALIAN AVE. PALM BEACH FL 33480					Street Address (P.O. Box Number is Not Acceptable)				_
					City		FL	Zip Code	
	ions of registered	agent.	d title if applicable.			red agent, or both, in the S	DATE		
as Shown	on record.	\$25,000.00		of Capital Contri			E REVERSE SIDE FOR I		_
·						t must be filed to cha		er.	
12.	NASO40	GENERAL PARTNER	INFORMATION	13.	···	ADDF	RESS CHANGES ONLY		\exists \subseteq
DOCUMENT # NAME STREET ADDRESS		an ave., ste. 2	CI		-ST-ZIP) CR2E003 (10/02)
CITY-ST-ZIP DOCUMENT #	PALM BEACH	FL 33480							H2E0
NAME STREET ADDRESS CITY-ST-ZIP				l	-ST-ZIP				-
DOCUMENT # NAME				STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP					-ST-ZIP	05/06/030	a manual forms from the first party	141.25	
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STREET ADDRESS CITY-ST-ZIP		<u></u>		. <u></u>	-ST-ZiP				
14. I hereby of indicated the receive	certify that the info on this report is tr er or trustes empo	mation supplied with the and the and the second second to the second sec	his filing does not quality and a second as the second as	ualify for the exe Whaye the same V Granter 620	mption stated in Se Legal effect as if m Torda Statutes	ection 119.07(3)(i), Florida : nade under oath; that I am	Statutes. I further certify a General Partner of the	that the information a limited partnership (or