2001	<b>UNIFORM</b>	<b>BUSINESS</b>	REPORT (UB	R)	

DOCUMENT # A2948	6	FILED						
LAND INVESTMENT I, LTD.		01 MAY 16 PM 4: 49						
Principal Place of Business 201 W. FIRST STREET SANFORD FL 32771	Mailing Address  201 W. FIRST STREET SANFORD FL 32771		SECRETARY OF STATE TALLAHASSEE. FLORIDA					
2. Principal Place of Business	3. Mailing Address		T 4001041 1010 11040 10411 AFORT BETON BET					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS S	PACE MJH				
City & State	City & State		4. FEI Number 59-2990758	Applied For Not Applicable				
Zip Country	Zip	Country		8.75 Additional ee Required				
6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered A	gent				
NELSON, LARRY W.		Name						
201 WEST FIRST STREET		Street Address (P.O. Box Number is Not Acceptable)						
SANFORD FL 32771								
		City	FL Zip Code					
8. The above named entity submits this statement for	the purpose of changing its regi	stered office or register	ed agent, or both, in the State of Florida.					
SIGNATURE Signature, typed or printed name of registered agent as	nd title if applicable. (NOTE: Reg	istered Agent signature required	when reinstating) DATE					
9. Capital Contributions as Shown on record. \$1,423.80	10. Amount of Capital Coin FLORIDA to date.		11. MAKE CHECK PAYABLE SEE REVERSE SIDE FOR	TO DEPT. OF STATE FEE INFORMATION				
A GENERAL PARTNER TI	HAT IS A BUSINESS ENTIT	Y MUST BE REGIST	ERED AND ACTIVE WITH THIS OFFICE.					
NOTE: General Partners MA  12. GENERAL PARTNER		orm; an amendmen 13.	t must be filed to change a general parti					
DOCUMENT # G19604		STREET ADDRESS		9				
NAME HEATHROW LAND & DEV CORP STREET ADDRESS 201 W. FIRST STREET		-						
CITY-ST-ZIP SANFORD, FL 32771		CITY-ST-ZIP	·					
DOCUMENT #		ŚTREET ADDRESS						
NAME STREET ADDRESS		CITY-ST-ZIP	<del></del>					
CITY-ST-ZIP  DOCUMENT #				****141.25				
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STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP						
DOCUMENT <b>#</b> NAME		STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP						
DOCUMENT # NAME		STREET ADDRESS		,				
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	,					
DOCUMENT AND NAME		STREET ADDRESS		,				
STREET ADDRUSS 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  Heathrow Land & Development Coro, Partner  SIGNATURE:  SIGNATURE:  Date Daytime Phone *								