

2000 UNIFORM BUSINESS REPORT (UBR)

00000000

CR2E003 (9/99)

DOCUMENT # A93000001464

1. Entity Name

KENNY ROGERS ROASTERS REALTY DEVELOPMENT, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB 10 AM 11:53

Principal Place of Business Mailing Address
3450 BUSHWOOD PARK DRIVE 3450 BUSHWOOD PARK DRIVE
SUITE 195 SUITE 195
TAMPA FL 33618 TAMPA FL 33618



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number		5. Certificate of Status Desired	
59-3218997		<input type="checkbox"/> \$8.75 Additional Fee Required	
Applied For		Not Applicable	

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent**

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI FL 33156

Name
Street Address (P.O. Box Number is 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 both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.	\$4,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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.

12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P93000087198	STREET ADDRESS	100003144391--3		
NAME	KRR REALTY, INC.	CITY - ST - ZIP	-02/23/00--01041--005		
STREET ADDRESS	3450 BUSHWOOD PARK DRIVE, SUITE #195		****526.25 ****526.25		
CITY - ST - ZIP	TAMPA FL 33618				
DOCUMENT #		STREET ADDRESS			
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STREET ADDRESS					
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

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/01/2000 (813) 935-8777
Date Daytime Phone #