2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT# A94000000397

1. Entity Name

LEE MANOR INVESTMENTS, LTD.

Principal Place of Business

Mailing Address

P.O. BOX 21458

P.O. BOX 21458

ST. PETERSBURG FL 33742

ST. PETERSBURG FL 33742

APERUYER AND FILED

02 APR 24 AM 10: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| | | | | *. ! | |
|---|---|---------------------|---|--------------|---|
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DUE BY MAY 1, 2002 |
| City & State | | City & State | | 1 | 4. FEI Number 59-3265505 Applied For Not Applicable |
| Zip | Country | Zip | Country | | 5. Certificate of Status Desired S8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New Registered Agent |
| FISHER, THOMAS JR ATTY 821 16TH STREET NORTH | | | | Street Ad | CITES L. EDWARDS CITES LIPA BOD HUMOUR STORY ACCORDANCE CITES LIPA BOD HUMOUR STORY |
| ST. PETERSBURG FL 33701 | | | | City 57 | FL 3370 |
| SIGNATURE . | named entity submits this statement | Muar | ing its register | ed office or | GENERAL PARTNER PARTNER |
| | | | Amount of Capital Contributions in FLORIDA to date. | | 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION |
| | A GENERAL PARTNER | THAT IS A BUSINES | S ENTITY N | NUST BE P | REGISTERED AND ACTIVE WITH THIS OFFICE. Indicate the filed to change a general partner. |
| 12. GENERAL PARTNER INFORMATION | | | 13. | | ADDRESS CHANGES ONLY |
| DOCUMENT / NAME | EDWARDS, ROGER L | | STR | EET ADDRESS | 155 5TH AUE, SO, #5 |
| STREET ADDRESS CITY-ST-ZIP | 155 5TH AVENUE SOUTH ST. PETERSBURG FL 33701 | | CIT | Y-ST-ZIP | ST. PETERSBURG, FL 3370/ |
| DOCUMENT # | EDWARDS, JANET L | · | STR | REET ADDRESS | 155 5Th AVE, SO. #5 |
| STREET ADDRESS CITY_ST-ZIP | 155 5TH AVENUE SOUTH ST. PETERSBURG FL 33701 | | | Y-ST-ZIP | 51. PETERSOURG, FC 3370/ |
| DOCUMENT # | <u> </u> | | STF | REET ADDRESS | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | сіт | Y-ST-ZIP | 3000053891732 04/30/020101301 7 |
| DOCUMENT # | | | STF | REET ADDRESS | ****141.25 ****141.25 |
| NAME STREET ADDRESS | | | CIT | V. CT. 710 | |

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

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP DOCUMENT #

CITY-ST-ZIP DOCUMENT #

CITY-ST-ZIP

NAME ! STREET ADDRESS

NAME STREET ADDRESS

SER EDWARDS