2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

A94000000863 **DOCUMENT #**

1. Entity Name

KEENAN FAMILY LIMITED PARTNERSHIP



Principal Place of Business 1900 WEST COMMERCIAL BLVD. SUITE 200 FT. LAUDERDALE FL 33309

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address
1900 WEST COMMERCIAL BLVD. SUITE 200

Suite, Apt. #, etc.

FT. LAUDERDALE FL 33309 3. Mailing Address

FILED

03 APR -9 PM 3:46

AREA TARY DE BOYE

,						DUE BT MAT 1, 2003		
City & State			City & State		4. FEI Number	65-0542210	Applied For Not Applicable	
Zip	Country	2	Ίρ	Country	5. Certificate of		8.75 Additional ee Required	
	6 Name and Address of Curre	nt Pegiet	ered Agent		7 Name and /	Address of New Registered Ag	·	
6. Name and Address of Current Registered Agent				Name Name				
BOYLEC	ONRAD-J ESQUIRE					<u>-</u>		
500 E. BROWARD BLVD., #1950				Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33394								
				City		FL	Zip Code	
	named entity submits this statemen ons of registered agent.	t for the p	urpose of changing its	registered office or regis	stered agent, or both	, in the State of Florida. I am fa	miliar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.								
9. Capital Contributions as Shown on record. \$1,300,000.00 10. Amount of Capita in FLORIDA to da					11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION			
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 PARTI	VER INFO	RMATION	13.		ADDRESS CHANGES ONLY	·	
DOCUMENT # NAME	J20149 KEENAN PROPERTIES, INC.		STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	DORESS 1900 WEST COMMERICIAL BLVD. #200			CITY-ST-ZIP				
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STREET ADDRESS CITY-ST-ZIP			-	CITY-ST-ZIP			·	
14. I hereby of	ertify that the information supplied v	with this fil	ing does not qualify for	the exemption stated in	Section 119.07(3)(i) if made under oath), Florida Statutes. I further certi- that I am a General Partner of the	y that the information ne limited partnership or	

the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: PARTNER V.P.

apr 2/03

Daytime Phone #