| 2002 OMPONIII DOSINESS NEPOM (ODA) | | | | | | | | | | | | |
|--|--|---|--------------|-----------------------------|--------|--|--------------|---|-----------------------------------|-------------------|---|--|
| DOCUMENT # A9400001651 | | | | | | | | FILED | | | | |
| DLE, LT | D. | | | | | | | | 02 APR - 1 | PM 12: | 24 | |
| Dring in all Ding | a of Dunings | | | ili a Aalalaa | | | | | SECRETAR' | Y OF STA | TE | |
| Principal Place of Business Mailing Address 101 BIG BEND ROAD 101 BIG BEND ROAD | | | | | | | | | ALLAHASS | <u>tt, rtu</u> i | TIUM | |
| RUSKIN FL 3 | 3570 | | R | uskin FL 33570 | | | | 1 1000 1011 | 818 18661 818 11 88641 886 | li Balil Balis Ba | 81 1(B) & B) 81 81 81 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Principal Place of Business 3. Mailing Address | | | | | | | | | | | | |
| | | | | | | | | | · · · | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | DUE BY MAY 1, 2002 | | | | |
| City & State | | | | City & State | | | | 4. FEI Number 59-3289775 Applied For Not Applicable | | | | |
| Zip | Country | | Z | Zip Cou | | ntry | | 5. Certificate of Status Desired | | | | |
| 6. Name and Address of Current Registered Agent | | | | | | Name | | 7. Name and Address of New Registered Agent | | | | |
| ELSBERRY, DONALD L 101 BIG BEND ROAD | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| RUSKIN FL 33570 | | | | | | | | | | | | |
| | | | | | | City | FL Zip Code | | | | | |
| 8. The above | named entity | submits this statement fo | r the p | urpose of changing its re | gister | ed office or | register | ed agent, or both, | in the State of Flo | rida. | | |
| SIGNATURE . | Signature, typed | or printed name of registered agent a | and title if | applicable. | | | | | | DATE | | |
| 9. Capital Contributions as Shown on record. \$5,000,000.00 In FLORIDA to date | | | | | | butions 11. MAKE CHECK PAYABLE TO DEP SEE REVERSE SIDE FOR FEE IN | | | | | | |
| , , <u>, , , , , , , , , , , , , , , , , </u> | | ENERAL PARTNER T General Partners MA | | | | | | | | | | |
| 12. GENERAL PARTNER INFORMATION DOCUMENT / | | | | | | | | | ADDRESS CHA | NGES ONLY | | |
| NAME | ELSBERRY, DONALD L 101 BIG BEND ROAD | | | 1 | STRE | ET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | | CITY | -ST-ZIP | | | | | | |
| DOCUMENT # NAME | WILLIFORD, LYNDA KAY ROUTE 1, BOX 448A, FAIRVIEW ROAD ANDREWS NC 28901 | | | | | ET ADDRESS | le | DI 1316 F | BEND RO | र्वा | Į. | |
| STREET ADDRESS CITY-ST-ZIP | | | | | | -ST-ZIP | T | | FL. 335 | | | |
| DOCUMENT # NAME | ME ELSBERRY, LORI DIANE | | | | | | | · | | | | |
| STREET ADDRESS CITY-ST-ZIP | 101 BIG E Ruskin F | BEND ROAD 'L 33570 | | · [| CITY | -ST-ZIP | | | | | | |
| DOCUMENT # | FL SRERR | Y LAWRENCE GLENN | | | STRE | ET ADDRESS | · <u>-</u> - | 90 | 00051 | 953 | 199)45008 | |
| STREET ADDRESS CITY-ST-ZIP | ELSBERRY, LAWRENCE GLENN 101 BIG BEND ROAD RUSKIN FL 33572 | | | | | -ST-ZiP | | | ****14 | 1.25 | ***141.25 | |
| DOCUMENT #. | | | | | | ET ADDRESS | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | RESS 101 BIG BEND ROAD | | | CITY | | -ST-ZIP | | | | | | |
| DOCUMENT # | | | _ | | STRE | ET ADDRESS | | | | | | |
| STREET ADORESS CITY-ST-ZIP | | | | | CITY | -ST-ZIP | | | | | | |
| 14. I hereby o | certify that the | information supplied with | this fill | ng does not qualify for the | e exe | nption state | d in Sec | ction 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 the receiver or trustee empewered to execute this report as required by Chapter 620, Florida Statutes

SINFLE UPECN HERE

SIGNATURE: Would be Elstern Sonac L. ECSBERRY 3/03/03

CR2E003 (9/01)