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 signeture 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 rectailed by Chapter 620, Florida Statutes the receiver or trustee empowere

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP DOCUMENT #

NAME STREET ADDRESS CITY-ST-ZIP

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1/13/03

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