

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0015611 AT

DOCUMENT # A96000000612
 1. Entity Name
SWAN FAMILY LTD.



FILED
 03 JAN 30 AM 10:27
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business
**6101 GULF OF MEXICO DRIVE
 LONGBOAT KEY FL 34228**

Mailing Address
**P.O. BOX 309
 BRADENTON BEACH FL 34217**



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

DUE BY MAY 1, 2003

4. FEI Number **65-0650057**
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SWAN, HARRY C
6101 GULF OF MEXICO DRIVE
LONGBOAT KEY FL 34228

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

9. Capital Contributions as Shown on record. **\$100,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$100,000,000.00**

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 PARTNER INFORMATION	
DOCUMENT #	P96000022826
NAME	SYGNUS GROUP OF SOUTHWEST FLORIDA, INC.
STREET ADDRESS	6101 GULF OF MEXICO DRIVE
CITY-ST-ZIP	LONGBOAT KEY FL 34228
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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CITY-ST-ZIP	

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 01/30/03--01017--005 **535.00

BSK

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

Sygnus Group of Southwest Florida, Inc., General Partner
 by **Harry C. Swan, President**

SIGNATURE: _____ **1/23/2003** **(941) 383-5803**

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)