2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR

UN	IT Off	M BOSIN	E2:	S KEPUK	1 (4	<u>JBK)</u>		_
DOCUMENT # A9700000840 1. Entity Name ROSENFELD ASSOCIATES, LTD.								FILED 2003 JAN 22 PM 12: 39
Principal Plac MICHAEL TAN 2161 PALM BE WEST PALM E	nenbaum, at Each Lakes	ity, at law BLVO	M 21	lailing Address Iichael Tannenbaum. 161 Palm Beach Lakes Test Palm Beach Fl 3	BLVD.	LAW		DIVIJION OF CORPORATIONS TALLAHASSEE, FLORIDA
2. Principal Place of Business				3. Mailing Address				- I LOBIOIF ALTO INTIL FEDIX FEDIX BUTAL B
. Suite, Apt.	#, etc.			Suite, Apt. #, etc.	· ·			DUE BY MAY 1, 2003
City & State				City & State			4. FEI Number 65-0741198 Applied For Not Applied For	
Zip		Country and Address of Current Re		Zip	Coun	ntry	5. Certificate of Status Desired	
	6. Name	and Address of Curre	nt Regis	stered Agent		7.		7. Name and Address of New Registered Agent
TANNENBAUM, MICHAEL 2161 PALM BEACH LAKES BLVD.						Name .		
	-					Street Add	iroce /E	(P.O. Box Number is Not Acceptable)
2161 PALM BEACH LAKES BLVD. RAYMOND OFFICE PLAZA, RM 304 WEST PALM BEACH FL 33409 3. The above named entity submits this statement f						Jueer Add		(1.O. Dox Number is Not Acceptable)
·						1		
						City		FL Zip Code
	ions of regist	ered agent.			registere	Ied office or re	egistere	red agent, or both, in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and title if applicable.								DATE
9. Capital Contributions as Shown on record. \$2,000,000.00 10. Amount of Capital Contributions in FLORIDA to date.						butions 1,733,	504	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
								TERED AND ACTIVE WITH THIS OFFICE. nt must be filed to change a general partner.
12. GENERAL PARTNER INFORMATION					13.			
DOCUMENT #	COOFFIEE D. ADDALLAL					ET ADDRESS		
STREET ADORESS CITY-ST-ZIP	3871 POIN	iciana dr., apt. 10 RTH FL 33467	3		CITY	-ST-ZIP		
OCUMENT # NAME	ROSENFE	LD. DAVID		W	STRE	ET ADDRESS		600010409426
STREET ADDRESS CITY-ST-ZIP ALEXANDRIA VA 22304				c		-ST-ZIP	•	01/22/0301026022 **578.75
DOCUMENT # NAME	<u> </u>				STRE	ET ADDRESS		
STREET ADDRESS* CITY-ST-ZIP					CITY	-ST-ZIP		
OOCUMENT # NAME					STRE	ET ADDRESS		
STREET ADDRESS					CITY	-ST-ZIP		·
DOCUMENT #					STRE	ET ADDRESS		
STREET ADDRESS					CITY	-ST-ZIP		
ocument / Iame					STRE	ET ADDRESS		
STREET ADDRESS					CITY	-ST-ZIP		

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/13/03 703-370-2273