2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # A97000001089 1. Entity Name WHITE EDELWEISS. LIMITED PARTNERSHIP AM 11: 32 Principal Place of Business Mailing Address SECRETARY OF STATE 6911 RIVERVIEW BOULEVARD N.W. 6911 RIVERVIEW BOULEVARD N.W. TALLAHASSEE, FLORIDA **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0753296 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KEENE, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 601 93RD AVENUE NORTH ST. PETERSBURG FL 33702 Zip Code FI 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 10. Amount of Capital Contributions 9. Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE \$1,960.00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. 12. DOCUMENT # STREET ADDRESS NAME WHITE, LESLIE R STREET ADDRESS 6911 RIVERVIEW BLVD., NW CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33702 DOCUMENT # STREET ADDRESS NAME WHITE, BEVERLY F STREET ADDRESS 6911 RIVERVIEW BLVD., NW CITY-ST-ZIP CITY-ST-7IP **BRADENTON FL 34209** DOCHMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT. STREET ADDRESS NANIE 11 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP

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 TYPE OF PRINTED NAME OF SIGNATURE ROUTINES OF PRINTED NAME OF SIGNATURE OF SIGNATURE

Jan 32, 2001 (941) 795- 155