2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # A9700001536 1. Entity Name						. 1		
SAEF GENERATIONS, LTD.						FILED		
Principal Place of Business Mailing Address						00 MAR 24 PM 7: 50		
1621 OAK CIRCLE SOUTH 1621 OAK CIRCLE SOUTH								
SARASOTA FL 34232 SARASOTA FL 34232-3479			•		SECRETARY OF STATE			
	· · · · · · · · · · · · · · · · · · ·							
Principal Place of Business 3. Mailing Address						ADER EDERA ERDAN DUNIA DOREN DUKEN DUKEN	i isini k inc i b iran kikin nkiki ibuk	
Suite Ant	Suite Ant # etc	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
Suite, Apt. #, etc. Suite, Apt. #, etc.								
City & State		City & State		4. FEI Number	65-0792083	Applied For Not Applicable		
Zip Country		Złp	Country		5. Certificate o	f Status Desired	\$8.75 Additional	
6. Name and Address of Current F		Registered Agent	Agent		7. Name and Address of New Registered Agent			
V. Hame and Address of Control Progration Agent				Name				
SAEF, JEROLD L 1621 OAK CIRCLE SOUTH SARASOTA FL 34232				Street Addres	(P.O. Box Number is Not Acceptable)			
				City FL Zip Code			Zip Code	
8. The above named entity submits this statement for the purpose of changing its reg								
8. The above	named entity submits this statement to	or the purpose of changing its	register	ea onice or regis	tered agent, or both	, in the state of Fiorida.		
SIGNATURE .	Signature, typed or printed name of registered agent	and title if annivable (NOTE	: Registere	d Agent signature requ	ired when reinstating)	DATE		
9. Capital Co		al Contri		<u>, , , , , , , , , , , , , , , , , , , </u>	11. MAKE CHECK PAYABL			
as Shown	on record.	in FLORIDA to da		IIST BE BEGI	STERED AND A		OR FEE INFORMATION	
NOTE: General Partners MAY NOT be changed on the			e form	MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. rm; an amendment must be filed to change a general partner.				
12.	GENERAL PARTNER INFORMATION			3. ADDRESS CHANGES ONLY			NLY	
NAME	SAEF, JEROLD L		STREET ADDRESS					
STREET ADORESS CITY-ST-ZIP	1621 OAK CIRCLE SOUTH SARASOTA FL 34232			-ST-ZIP	-ZIP			
DOCUMENT#	0.1000.1112.01202			TIT ADDDEDG	0000031963101			
NAME	SAEF, STEVEN H 2793 ROSEDOWN MT. PLEASANT SC 29464		SIN	EET ADDRESS	-04/05/0001014018			
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	****340.75 ****340.75			
DOCUMENT#	ME SAEF, DAVID K ,			ET ADDRESS				
NAME STREET ADDRESS								
CITY-ST-ZIP	MARIETTA GA 30062		СПҮ	-ST-ZIP	· · .			
DOCUMENT #	SAEF, LAURA R		STR	EET ADDRESS				
STREET ADDRESS 4911 ROOSEVELT STREET			CITY	-ST-ZIP	-ZIP			
CITY-ST-ZIP				VI 2II				
DOCUMENT# NAME SAEF, ELAINE L			STR	EET ADDRESS				
STREET ADDRESS	DET ADDRESS 4911 ROOSEVELT STREET			-ST-ZIP				
CITY-ST-ZIP DOCUMENT #								
NAME STREET ADDRESS CITY-ST-ZIP			STRI	EET ADORESS				
			СПҮ	'-ST-ZIP	-ZIP			
14. I hereby certify that the information sapplied with this filing does not qualify or the indicated on this report is true and acculate and that my signature shall have the receiver or trustee empowered to execute this report as required by Chapter 6.				mption stated in	Section 119.07(3)(i)	, Florida Statutes. I further o	ertify that the information	
indicated the receiv	on this report is true and acculate and ver or trustee empowered to execute the	i triat my signature shall have is report as lequired by Chap	er 620.	e legal effect as Florida Statutes	н гладе under oath;	maci am a General Partner (or the littlited partnership or	
	\ \ / /	N/AL ~/	I }	ν				

PED OR PRINTED NAME OF SIGNING GENERAL PARTN

Daytime Phone #

Date