APPROVI

2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name BRW LIMITED PARTNERSHIP					02 APR 15 PM 12: 25	
Principal Place of Business Mailing Address 128 JOHN SIMS PARKWAY P.O. BOX 8 VALPARAISO FL 32580 VALPARAISO FL 32580			30		TĂLĻAHASSEE, FLORIDA	
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2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DUE BY MAY 1, 2002	
City & Stat	te	City & State	City & State		4. FEI Number 59-3472290 Applied For Not Applicable	
Zip Country		Zip	Country		S. Certificate of Status Desired	
	6. Name and Address of Curr	ent Registered Agent			7. Name and Address of New Registered Agent	
				Name		
FEDONCZAK, TERESA W 128 JOHN SIMS PARKWAY VALPARAISO FL 32580				Street Address (P.O. Box Number is Not Acceptable)		
8. The above named entity submits this statement for the purpose of changing its re						
o. The above	rhamed entity submits this statemen	it for the purpose of changing	g its register	rea office or regist	ered agent, or both, in the State of Florida.	
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.	"		DATE	
9. Capital Contributions \$1,000,000 10. Amount of Capital Cont				ibutions	11: MAKE CHECK PAYABLE TO DEPT. OF STATE	
as Shown	onnecora.	III FLORIDA		AUST BE REGIS	SEE REVERSE SIDE FOR FEE INFORMATION (STERED AND ACTIVE WITH THIS OFFICE.	
NOTE: General Partners MAY NOT be changed on the				n; an amendme	ent must be filed to change a general partner.	
12.	GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME	P97000086997 BRW COMPANY, INC. 138 JOHN SIMS PARKWAY VALPARAISO FL 32580		STR	EET ADDRESS		
STREET ADDRESS City-St-Zip			CITY	Y-ST-ZIP		
DOCUMENT # NAME				EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				r-ST-ZIP	9000053038696	
DOCUMENT #		7 Lat 2	STR	EET ADDRESS	-04/22/0201004016 ****526.25 *****526.25	
STREET ADDRESS CITY-ST-ZIP			CITY	/-ST-ZIP		
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DOCUMENT#				EET ADDRESS		
STREET ADDRESS CITY-CT-ZIP			CITY	'-ST-ZIP		
OCUMENT #			STRE	EET ADDRESS		
STREET ADDRESS			CITY	'-ST-ZIP		
	Lertify that the information supplied	vith this filing does not qualify	for the eve	motion stated in 9	Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicatéd	on this report is true and accurate a ver or trustee empowered to execute	ind that my signature shall ha	ive the same	e legal effect as if	made under path; that I am a General Partner of the limited partnership or	