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210 GENOVA DRIVE OWEDO R. 32785-7228 2. Principal Place of Business 3. Main'ng Address Sule, Apr. #, etc. City & State City & State City & State City & State City Sta	SANFORD INVESTMENTS FAMILY LIMITED PARTNERSHIP					FILED			₽n
Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE	2110 GENOVA DRIVE 2110 GENOVA DRIVE			1 SECR	APR 23 AM IO: 32				
Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE	Principal Place of Business 3. Mailing Address								
Zip Country Zip Country 5. Certificate of Status Desired Agent Name SANFORD, BRIAN J 2110 GENOVA DRINE OVIEDO FL 32765-7226 City FL Zip Code 8. The above remed entity submits this statument for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or preval name of registered status it is inspicated. 9. Capital Contributions Status Desired Sta	Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For				
Country Zip Country Zip Country S. Certificate of Status Desired S8.75 Additional Fee Required S8.75 Additiona			City & State					\Box	
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SAÑFORD, BRIAN J 2110 GENOVA DRIVE OVIEDO FL 32765-7226 City FL Zip Code City FL Z		6. Name and Address of Curre	nt Registered Agent	<u> </u>	I	7 Name and A	Address of New Registered		
8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. SIGNATURE Signature, speed or private name of registered agent and their approache. WINTER Agent speed or private name of registered agent and their approache. WINTER Agent speed or private name of registered agent and their approache. WINTER Agent Speed or private name of registered agent and their approache. WINTER AGENCE PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partiners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12. GENERAL PARTINER INFORMATION 13. ADDRESS CHANGES ONLY STREET ADDRESS CITY-51-2IP JOURNAME ONE OF THE ADDRESS CITY-51-2IP JOURNAME ONE	SAÑFORD, BRIAN J 2110 GENOVA DRIVE				Name				
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 Signature, typed or preted name of registered agent and title if sopression. ONTE: Registered Agent separative required when reneating. A GENERAL PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERD AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12. GENERAL PARTINER INFORMATION 13. ADDRESS CHANGES ONLY SIREET ADDRESS CITY-ST-2IP OURDINGT / WARE SIRE					City	ly E Zip Code			
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4. 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 employed to execute this report about 1997 State 200 Florida Statutes.		ify that the information supplied w	ith this filing does not qualify for			ction 119 07/2\/\)	Florida Statutos I further	rife, that the information	4

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: