2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR**

| DOCUMENT # A | \98000002900 |
|--------------|--------------|
|--------------|--------------|

1. Entity Name

WATERFORD IMPERIAL PARTNERS, LTD.



Principal Place of Business 101 RIVERFRONT BLVD SUITE 610 **BRADENTON FL 34205**

Mailing Address 101 RIVERFRONT BLVD SUITE 610

BRADENTON FL 34205

03 HAY -5 PH 5: 06 SECRETARY OF STATE TALLAHASSEE FLORIDA

A CONTROL TO CONTROL OF THE CONTROL

| Principal Place of Business 3. Mailing Address | | | | | | |
|--|---------|--|---|------|--------------------------|-----------------------------------|
| Suite, Apt. #, 6 | etc. | Suite, Apt. #, etc. | | | DUE BY MAY 1, 2003 | |
| City & State | | City & State | | | 4. FEI Number 59-3551212 | Applied For Not Applicable |
| Zip | Country | Zip | Country | | | \$8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | | |
| GRIMES, CAI | LEB J | | | Name | + | |
| 1023 MANATEE AVENUE WEST BRADENTON FL 34205 | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | | | 05/05/0301024011 **141.25 | | | |
| | | | | City | FI | Zip Code |

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record.

\$100.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 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.

| 12. | GENERAL PARTNER INFORMATION | 13. | ADDRESS CHANGES ONLY |
|-------------------------------|--|----------------|---------------------------------------|
| DOCUMENT # | P98000035491 WATERFORD IMPERIAL, INC. | STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | 101 RIVERFRONT BLVD. SUITE 610 BRADENTON FL 34205 | CITY-ST-ZIP | |
| DOCUMENT # NAME | | STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY-ST-ZIP | |
| DOCUMENT # NAME | · | STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY-ST-ZIP | |
| DOCUMENT # NAME | | STREET ADDRESS | ! |
| STREET ADDRESS CITY-ST-ZIP | | CITY-ST-ZIP | и |
| DOCUMENT # NAME | | STREET ADDRESS | |
| STREET ADDRESS CITY-ST-ZIP | | CITY-ST-ZIP | |
| DOCUMENT # NAME | • | STREET ADDRESS | · · · · · · · · · · · · · · · · · · · |
| STREET ADDRESS CITY-ST-ZIP | | 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:

Denkis D Bradford, President of Waterford Imperiate, Inc. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GE

4-30-03

941 725-7272

Daytime Phone #