

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000311

1. Entity Name
R.B. KEMPFER FAMILY LIMITED PARTNERSHIP

Principal Place of Business 601 EAST PALMETTO AVENUE ATTN: ROBERT B. KEMPFER MELBOURNE FL 32901	Mailing Address 601 EAST PALMETTO AVENUE ATTN: ROBERT B. KEMPFER MELBOURNE FL 32901-4723
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FILED
Mar 03 2000 8:00 am
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3561863	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent NASH, CHARLES IAN 930 SOUTH HARBOR CITY BLVD., SUITE 505 MELBOURNE FL 32901	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. \$2,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 # NAME STREET ADDRESS CITY - ST - ZIP	P99000005654 R.B. KEMPFER ENTERPRISES, INC. 601 EAST PALMETTO AVENUE MELBOURNE FL 32901	STREET ADDRESS CITY - ST - ZIP	800003172500-2 -03/16/00--01063--024 ****526.25 ****526.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS CITY - ST - ZIP	<i>rf 3/15/00</i>
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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: ROBERT B. KEMPFER
Robert B. Kempfer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-7-2000 **407 957-8854**
Date Daytime Phone #

CR2E003 (9/99)