2002 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # A9900000311 1. Entity Name | | | | | | | |
|---|---|---|------------------|--|---|---|--|
| R.B. KEMPFER FAMILY LIMITED PARTNERSHIP | | | | | FILED 02 JAN 18 PM 9:59 | | |
| | | | | | | | |
| ATTN: RICHARD H. KEMPFER | | 601 EAST PALMETTO AVENUE ATTN: RICHARD H. KEMPFER | | TALLAHASSEE, FLORIDA | | | |
| MELBOURNE | FL 32901 | MELBOURNE FL 32901 | | | | | i i i i i i i i i i i i i i i i i i i |
| 2. Principal F | 3. Mailing Address | lailing Address | | 1 | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | DUE BY MAY 1, 2002 | | |
| City & State | | City & State | | 4. FEI Number | 59-3561863 | Applied For Not Applicable | |
| Zip Country | | Zip | Zip Country | | -5. Certificate of Status Desired \$8.75 Additional Fee Required | | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | | | |
| ALAGU GUARUFO IAM | | | | Name | | | |
| NASH, CHARLES IAN 930 SOUTH HARBOR CITY BLVD., SUITE 505 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| MELBOURNE FL 32901 | | | | | | | |
| | | | | City FL Zip Code | | | |
| 8. The above | named entity submits this statement for | the purpose of changing its | register | ed office or register | ed agent, or both | , in the State of Florida. | |
| | • • • • • • | • • • | _ | | • | | |
| SIGNATURE | Signature, typed or printed name of registered agent a | nd title if applicable. | | | <u> </u> | DATE | |
| Capital Co as Shown | | 10. Amount of Capita in FLORIDA to da | l Contri ite. | butions 710,435 | | 11. MAKE CHECK PAYABLE SEE REVERSE SIDE FO | |
| | A GENERAL PARTNER T NOTE: General Partners MA | HAT IS A BUSINESS EN | TITY N | UST BE REGIST | TERED AND AC | TIVE WITH THIS OFFICE | . |
| 12. | GENERAL PARTNER | | 13. | i, an amendinen | it must be med | ADDRESS CHANGES ON | |
| DOCUMENT # | P99000005654 | | | ET ADDRESS | | | |
| NAME STREET ADDRESS | R.B. KEMPFER ENTERPRISES, INC. 601 EAST PALMETTO AVENUE | | Altra | OX ZUD | | | |
| CITY-ST-ZIP | MELBOURNE FL 32901 | | CITY | -ST-ZiP | | | |
| DOCUMENT # NAME | • | | STRE | ET ADDRESS | | | |
| STREET ADDRESS | 5 | | | -ST-ZIP | | | |
| DOCUMENT # | | | | | 6000047939867 -01/24/0201034010 | | |
| NAME | • | | STRE | ET ADDRESS | | ****526,25 | ****526_25 |
| STREET ADDRESS CITY-ST-ZIP | | | CITY | -ST-ZiP | | | ĺ |
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| NAME STREET ADDRESS | | | | | | | |
| CITY-SY-ZIP | | | CITY | -ST-ZIP | , | | |
| DOCUMENT # NAME | | - | STRE | ET ADDRESS | | | |
| STREET ADDRESS CITY-ST-ZIP | | | CITY | -ST-ZIP | | | |
| 14. I hereby of indicated the receive | certify that the information supplied with on this report is true and accurate and the | this filing does not qualify for that my signature shall have the | the exer | mption stated in Sec e legal effect as if m | ction 119.07(3)(i), ade under oath; t | Florida Statutes. I further cert hat I am a General Partner of | ify that the information the limited partnership or |

1-16-2002 467-957-8854