	NESS REPORT (UBR)	
DOCUMENT # A99000	0000499	
STOCKHOLMES, LIMITED	02 APF	FILED
Principal Place of Business C/O MYERS KRAUSE & STEVENS. CHARTERED(LBL) 5811 PELICAN BAY BLVD SUITE 600 NAPLES FL 34108	Mailing Address C/O MYERS KRAUSE & STEVENS. CHARTERED CALE 5811 PELICAN BAY BLVD., SUITE 600 NAPLES FL 34108	1
2. Principal Place of Business 5811 Pelican Bay Blvd.	3. Mailing Address 5811 Pelican Bay Blvd.	
Ste 600 #, etc.	Suite Apt, #, etc. Ste 600	DUE BY MAY 1, 2002
City 9 State	City 9 Ctata	4 FELAL

		1			1				
Ste 600 #, etc. Ste		Suite, Apt. #, etc. Ste 600	Suite, Apt. #, etc. Ste 600		DUE BY MAY 1, 2002				
City & State Naples, Florida City & State Naples, Florida		la		50-2566543		Applied For Not Applicable			
Zip 34108	Country	Zip 34108	Country		5. Certificate of Status Desired			8.75 Additional ee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent							
LAW, LESTER B ESQ. 5811 PELICAN BAY BLVD., SUITE 600 NAPLES FL 34108		Name FOWLER WHITE MYERS KRAUSE Street Address (P.O. Box Number is Not Acceptable) 5811 Pelican Bay Blvd. Ste 600 City Naples FL 7ip.Code 34108							
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for the purpose of changing its registered office or registered agent, or both, in the State of Florida. KRAUSE

SIGNATURE BY:

/Andrew J. Krause

9. Capital Contributions as Shown on record.

\$10,000,000.00

10. Amount of Capital Contributions in FLORIDA to date. 0

11. MAKE CHECK PAYABLE TO 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 # NAME	P99000028109 STOCKHOLMES, INC.	STREET ADDRESS	AL 1 *			
STREET ADDRESS CITY-ST-ZIP	5811 PELICAN BAY BLVD., SUITE 600 NAPLES FL 34108	CITY-ST-ZIP				
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DOCUMENT # NAME		STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP				

I hereby certify that the information supplied with this filling 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