2002 UNIFORM	BUSINESS	REPORT	(UBR
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DOCU		0001367				, FI	LED		
SPECTRUM COMMUNITY SERVICES, LTD.			02 FEB 18 PM 4: 02				đ		
Principal Place of Business Mailing Address 9311 SAN PEDRO 9311 SAN PEDRO STE 1103 SAN ANTONIO TX 78216 SAN ANTONIO TX 78216			- 11		SECRETARY OF STATE TALLAHASSEE, FLORIDA				1
2. Principal Place of Business 845 PROTON RD. 845 PROTON-RD.) .							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DUE BY M	AY 1, 200	2	\Box
	TONIO, TX	City & State SAN ANTONIO,		1.1	74-2027600			Applied For Not Applicat	
Zip 78258	Country UNITED STATES	. Zip 78258	Country UNITED S	्राम्य असम्बद्धाः असम्बद्धाः	5. Certificate of	of Status Desired	□ \$	8.75 Additional se Required	
, , , ,	6. Name and Address of Current		ONTIED	DIALES	7. Name and A	Address of New Re			
DONATO, JOE 610 NORTH WYMORE ROAD WINTER PARK FL 32789			Nam Stree		P.O. Box Number	is Not Acceptable)			
			City				FL	Zip Code	
SIGNATURE . 9. Capital Co as Shown		not title if applicable. 10. Amount of Capital in FLORIDA to dat	Contributions e.	2,757,	150:00	11. MAKE CHECK SEE REVERSI	DATE PAYABLE T SIDE FOR	O DEPT. OF STATE FEE INFORMATION	
	NOTE: General Partners MA	Y NOT be changed on the	form; an a	mendmen	t must be filed	to change a ger	neral partn	er.	
12. DOCUMENT # NAME STREET ADDRESS	GENERAL PARTNER M9900001307 GLOUCESTER HOLDINGS LLC 9311 SAN PEDRO AVE	INFORMATION	13. STREET ADDRES	845	PROTON RD	ADDRESS CHAN	IGES ONLY		R2E003 (9/01)
CITY-ST-ZIP	SAN ANTONIO TX	· - · · · · · · · · · · · · · · · · · ·		SAN `	ANTONIO,	TX 78258	<u>. </u>		
DOCUMENT # NAME STREET ADDRESS			STREET ADDRES	SS					
CITY-ST-ZIP			CITY-ST-ZIP					· · · · · · · · · · · · · · · · · · ·	
DOCUMENT # NAME			STREET ADDRES	55-					- -
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		30	100049 -02/22/0	910	0:34 048008	
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STREET ADDRESS City-St-Zip			CITY-ST-ZIP		*	***			
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STREET ADDRESS CITY-ST-ZIP			. CITY-ST-ZIP					<u></u>	
DOCUMENT # NAMÉ,		i	STREET ADDRES	ss					
STREET ADDRESS DITY-ST-ZIP			CITY-ST-ZIP						
 I hereby c indicated the receive 	ertify that the information supplied with to on this report is true and accurate and to er or trustee empowered to execute this	his filing does not qualify for the hat my signature shall have the report as required by Chapter	ne exemption s e same legal e c 620. Florida 9	stated in Sec Iffect as if ma	ction 119.07(3)(i), ade under oath; ti	Florida Statutes. I fu hat I am a General f	urther certify Partner of the	that the information limited partnership	or

SIGNATURE:

2/10/02