2003 LIMITED PARTNERSHIP

√ÚNIFORM BUSINESS REPORT (UBR)					
DOCUMENT # B000000098 1. Entity Name FCC PARTINERS LP, LTD.					DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS DIVISION OF CORPORATIONS
% THE GOODMAN COMPANY % 777 S. FLAGLER DR., SUITE 1101E 77		Mailing Address % THE GOODMAN COMPANY 777 S. FLAGLER DR., SUITE 1101E WEST PALM BEACH FL 33401			03 MAY 12 PM 3: 30
2. Principal Place of Business		3. Mailing Address		<u></u>	-
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DUE BY MAY 1, 2003
City & State		City & State			4. FEI Number 65-0993717 Applied For Not Applicable
Zip	Country	Zip	Coun	itry	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent
SHEWALTER, WILLIAM A				Canant Antalana (DO Day Musebas (a Not Acceptable)
C/O THE GOODMAN COMPANY				Street Address (P.O. Box Number is Not Acceptable)
777 SOUTH FLAGLER DRIVE WEST PALM BEACH FL 33401					
				City	FL 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. DATE					
9. Capital Contributions as Shown on record. 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.					
DOCUMENT /	GENERAL PARTNER M00000000617	INFORMATION	13.	 -	ADDRESS CHANGES ONLY
NAME Street Address	FCC GP LLC 777 S. FLAGLER DR., SUITE 1101E			-ST-ZIP	
CITY-ST-ZIP	WEST PALM BEACH FL 33401				
DOCUMENT # NAME STREET ADDRESS			ľ	ET ADDRESS	700018795467
CITY-ST-ZIP			CITY	-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS			STRE	ET ADDRESS	
CITY-ST-ZIP	<u> </u>		CITY	-ST-ZIP	
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CITY-ST-ZIP DOCUMENT /			CITY	-51-21	
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CITY-ST-ZIP			CITY	-ST-ZIP	<u> </u>
NAME STREET ADDRESS			STRE	ET ADDRESS	
CITY-ST-ZIP			L	-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 FCC 6P LLC, general partnership, by: Goodman Properties, Inc., Its manager SIGNATURE: (561) 833-3777					
SIGNATURE: 1561) 833-3777					