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1. Entity Name						:	
SHEPHERD PARTNERS LIMITED PARTNERSHIP					FILED	•	
Principal Plac	ncipal Place of Business Mailing Address				102 SEP125 PM12:117		
33 NORTH GARDEN AVENUE. SUITE 750 CLEARWATER FL 33755 CLEARWATER FL 33755			je. Suit	SUITE 750		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
					:		
	Place of Business : 3. Mailing Address			T TORKING AND BEILK BOLKI BOKKI BOKKI BOKKI BOKKI BUKKI BUKKI BUKKI ALAKA ALAWA KINDA DIKA INDIK			
	N. Garden Ave P.G. Box 1348 te, Apt. #, etc.					\neg	
[#] 770						DUE BY SEPTEMBER 25, 2002	4
City & Star	water FL	Clear water	City & State			4. FEI Number 59-3655318 Applied For Not Applicable	e
Zip	Country	Zip	Country			5. Certificate of Status Desired S8.75 Additional	1
33755	6. Name and Address of Current I	33757 Registered Agent	lusa		7. Name and Address of New Registered Agent		
				Name			
	, ronald j I garden avenue, suite 750			Street Address (P.O. Box Number is Not Acceptable)			
	TER FL 33755						\dashv
OLLANIA	116111 2 00:00			City		Zip Code	\dashv
							4
	e named entity submits this statement for tions of registered agent.	the purpose of changing its	register	ed office or	registere	ed agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable.			·	DATE	
9. Capital Co	ontributions &0.004 PDE 00	10. Amount of Capita		butions	•	11. MAKE CHECK PAYABLE TO DEPT. OF STATE	٦
as Shown		in FLORIDA to da	· · · · · · · · ·	IUST BE F	REGIST	SEE REVERSE SIDE FOR FEE INFORMATION FERED AND ACTIVE WITH THIS OFFICE.	-
	NOTE: General Partners MA	Y NOT be changed on th	e form			t must be filed to change a general partner.	
12.	GENERAL PARTNER	INFORMATION	13.	ADDRESS CHANGES ONLY			ج إ
NAME	#B96000000008 BULLDOG CAPITAL MANAGEMENT LIMITD PRTNRSHP		STRE	EET ADDRESS	33 r	N. Garden Ave #770	
STREET ADDRESS CITY-ST-ZIP	33 NORTH GARDEN AVENUE, SU CLEARWATER FL 33755	h garden avenue, suite 750		-ST-ZIP		Parwater F1 33755	
DOCUMENT # NAME	PRESS			STREET ADDRESS		,	1
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STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP	·····		1
DOCUMENT #			STRE	ET ADORESS			1
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP			7
14. I hereby o	certify that the information supplied with	this filing does not qualify for	the exe	mption state	ed in Sec	ction 119.07(3)(i), Florida Statutes. I further certify that the information	7

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:

SIGNATIONÉ REQUIRED

727-298-54:00 Daytime Phone #



September 17, 2002

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314-6327

Dear Registration Section:

This letter is to inform you Shepherd Partners Limited Partnership did not receive the first notice to file the Uniform Business Report. Therefore, we are not including in our payment at this time the late fee of \$400, and we respectfully request abatement of the late fee penalty.

Sincerely

Paula Hayes Controller

Paula Hayes