2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

B0000000279 **DOCUMENT #**

1. Entity Name

GENESIS HOME CENTERS, LIMITED PARTNERSHIP



Principal Place of Business	
2701 CAMBRIDGE COURT. SUITE	300
AUBURN HILLS MI 48326	

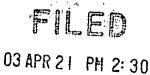
2. Principal Place of Business

3. Mailing Address

Mailing Address 2701 CAMBRIDGE COURT. SUITE 300

AUBURN HILLS MI 48326







Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				DUE BY MAY 1, 2003					
City & State City & State		City & State				4. FEI Number 38-3548972			\longrightarrow	Applied For Not Applicable			
Zip		Country	Z	ip	Country			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
	6. Name	and Address of C	urrent Regist	ered Agent				7. Name and	Address of New R	egistered	Agent		
C T CORPORATION SYSTEM						Name							
1200 SOUTH PINE ISLAND ROAD						Street Address (P.O. Box Number is Not Acceptable)							
PLANTATION FL 33324													
<i>*</i>						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 .													
	Signature, typed	or printed name of register	ed agent and title if				 -			DATE		DY OF STITE	
9. Capital Contributions as Shown on record. \$100.00 in FLORIDA to date				ite.		-	T-5-0-7	11. MAKE CHEC SEE REVERS	SE SIDE FO	OR FEE INFO			
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 PA	RTNER INFO	RMATION	13.				ADDRESS CH	ANGES OF	VLY		
DOCUMENT / F0000005182 NAME CHAMPION GP, INC.				STREE	et address				·-····				
STREET ADDRESS CITY-ST-ZIP	ALCOHOLD AND A COOK				CITY-	ST-ZIP	800016397748						
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14. Thereby o	ertify that th	e information suppli	ed with this fil	ing does not qualify for	the exen	nption stat	ted in Sec	ction 119.07(3)(i)	, Florida Statutes.	I further ce	ertify that the	e 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 is rue.

SIGNATURE

