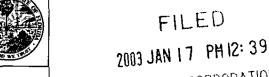
## 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

OITH ORIN	DUSHIESS REPORT
DOCUMENT #	B0100000260

1. Entity Name THE ASPETUCK FUND, L.P.



II						GO WE IN		2003 JAN 17	PFI 12	· )	,	
Principal Place of Business THE CORPORATION TRUST COMPANY CT TRUST CENTER. 1209 ORANGE STREET WILMINGTON DE 19801  Mailing Address 301 YAMATO ROAD. SUITE : BOCA RATON FL 33431		 E 2200		DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA								
2. Principal Place of Business 3. Mailing Address					DIA BENER HIBIN BENIR DEN							
Suite, Apt. #, etc. Suite, Apt. #, etc.					<u></u>	DUE BY MAY 1, 2003						
City & State City & State							4. FEI Number Applied Not App					
Zip		Country		Zip	try	5. Certificate of	f Status Desired		<b>\$8.</b> Fee	<b>75</b> Additional Required		
	6. Name	and Address of Current	Regis	tered Agent		·	7. Name and A	ddress of New R	egistered	Agen	t	
BRAICA, F			- 14gio	Note Agent		7. Name and Address of New Registered Agent Name						
301 YAMATO ROAD, SUITE 2200						Street Address (P.O. Box Number is Not Acceptable)						
BOCA RA	TON FL 33	431										
						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 a	and title i	applicable.		<u>.</u>			DATE			
9. Capital Contributions as Shown on record. \$4,000,000-00 In FLORIDA to date.						outions	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.												
12.		GENERAL PARTNER	INFO	RMATION	13.		ADDRESS CHANGES ONLY					
DOCUMENT #		P01000070241 WESTPORT CAPITAL MANAGEMENT CORPORATION				ET ADDRESS			<u></u>			
STREET ADDRESS CITY-ST-ZIP		ito road, suite 2200 ton FL 33431			CITY	-ST-ZIP	<u>700010199037</u> 01/17/0301086004 **\$26.25					
DOCUMENT / NAME						ET ADDRESS	01/17/0301086004 **526.25					
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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

SIGNATURE:

SIGN/CULTED STATES SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

114/03

561-241-0018