2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # .B0100000335

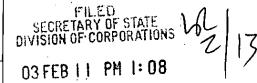
1. Entity Name

SEBASTIAN VENTURE NO. ONE, L.P.



Principal Place of Business Mailii
16910 DALLAS PARKWAY. SUITE 100 16910
DALLAS TX 75248 DALL

Mailing Address 16910 DALLAS PARKWAY. SUITE 100 DALLAS TX 75248



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2. Principal I	Maco	3. Mailing Address	Marce	Blu				
Suite, Apt. #, etc. Suite, Apt. #, etc.						DUE BY MAY 1, 2003		
Tacksonville, FL. Jacksonvill				le, f		4. FEI Number 59-3704912 Applied For Not Applicable		
32207 Duval 32201				Duva	Q	5. Certificate of Status Desired S8.75 Additional Fee Required		
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent			
PRATT, DENNIS L					Name			
	VD SHITE 3		Street Address (P.O. Box Number is Not Acceptable)					
10450 SAN JOSE BLVD., SUITE 3 JACKSONVILLE FL 32257								
· ·						,		
/ - '			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 ————————————————————————————————————								
9. Capital Contributions as Shown on record. \$0.00 10. Amount of Capital Contributions in FLORIDA to date								
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 f					form; an amendment must be filed to change a general partner.			
DOCUMENT #	ST. IVES HOLDINGS, L.L.C. ADDRESS 16910 DALLAS PARKWAY, SUITE 100			13.		ADDRESS CHANGES ONLY		
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNE

1-15-03

Daytime Phone #