ر الأسرر		ARTNERSHIP ESS REPORT	,	<b>.</b>
DOCU 1. Entity Nan	MENT # B010000	20440	, C	FILED
K MAGN	ÚM FUND, LP	•		02 JUN 17 PM 4: 43
				SECRETARY OF STATE
* *	DO NOT WRITE	E IN THIS SP	TALLAHASSEE FLURIDA	
Principal Place of Business     3. Mailing Address				DO NOT WRITE IN THIS SPACE
417 1245 St, W. 417 124 Suite Apt. #, etc. Suite Apt. #, etc.			4 St.W.	DO NOT WHITE IN THIS SPACE
Ste, 213 Sk, 21			3	4. FEI Number Applied For
bradenton it Brade		Braden	ton, Fr	36-4486877 Not Applicable
31	1205 Country SA	34205	USA.	5. Certificate of Status Desired \$8.75 Additional Fee Required  7. Name and Address of Current Registered Agent
	DO NOT W	DITE	Name	Robert Joseph Beasley
	DO NOT W	the same of the sa	Street Add	ress (P.O. Box Number is Not Acceptable)
· «²	IN THIS SE	ACE	City	Ste. 213
8. The above	named entity spirmits this statement is	or the purpose of changing its re		Bradenton. FL Zip Code 3 gistered agent, or both, in the State of Florida.
SIGNATURE _	Cobert	Joseph De	she/	4-24-02
9. Capital Contributions as Shown on record.  10. Amount of Capital Contributions in FLORIDA to date.  11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION				
as snown c	A GENERAL PARTNER	THAT IS A BUSINESS ENT	ITY MUST BE RE	SEE REVERSE SIDE FOR FEE INFORMATION GISTERED AND ACTIVE WITH THIS OFFICE.
12.	GENERAL PARTNE		form; an amend	ment must be filed to change a general partner.
DOCUMENT # NAME STREET ADDRESS	Longboat Globa 417 1245 St. W.	y Advisors, w	STREET ADDRESS	88.75-Adm
CITY-ST-ZIP	Bradenton, FL		CITY-ST-ZIP	/385.00-up
DOCUMENT # NAME			STREET ADDRESS	52.50-10
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	9000053118191 -06/21/0201078008
DOCUMENT #		·	STREET ADDRESS	*****88.75 *****88.75
TREET ADDRESS			CITY-ST-ZIP	DO NOT WRITE
DOCUMENT #	•		STREET ADDRESS	IN THIS SPACE
TREET ADDRESS		:	City-St-Zip	4.
OCUMENT #	·		STREET ADDRESS	9000059118191
TREET ADDRESS ITY-ST-ZIP			CITY-ST-ZIP	-06/21/0201078009 ****385.00 ****385.00 *
OCUMENT:#			STREET ADDRESS	9000059118191
TREET ADDRESS		ļ	City-st-zip	*****52.50 ******52.50
4. 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 fequired by Chapter 620, Florida Statutes				

SIGNATURE: \_

124-02 941-747-7711