2002 UNIFORM BUSINESS REPORT (UBR)

B94000000304 DOCUMENT

1. Entity Name

BRONZE/DAYTONA, L.P., LTD.

Principal Place of Business

2. Principal Place of Business

1853 PIEDMONT RD.

TERRACE LEVEL MARIETTA GA 30066

Suite, Apt. #, etc.

City & State

Zip

Mailing Address

1853 PIEDMONT RD. TERRACE LEVEL

MARIETTA GA 30066

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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AND

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

DUE BY MAY 1, 2002

58-2122973

Not Applicable \$8.75 Additional

Applied For

7. Name and Address of New Registered Agent

5. Certificate of Status Desired

Fee Required

HUMPHRIES, J. GREGORY ESQ

201 E. PINE ST, SUITE 701 ORLANDO FL 32801

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City

Country

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable 9. Capital Contributions

as Shown on record.

Country

\$99.00

6. Name and Address of Current Registered Agent

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO 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 INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT #	F94000003912 BRONZE HOLDINGS, INC.	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP MARIETTA GA 30066		CITY-ST-ZIP	
DOCUMENT # NAME	F9600006319 DAYTONA G.P., INC.	STREET ADDRESS	6000054497262
STREET ADDRESS CITY-ST-ZIP	FIVE PIEDMONT CENTER, STE. 750 ATLANTA GA 30305	CITY-ST-ZIP	500054497262 -05/03/0201051002 ****141.25 ****141.25
DOCUMENT #		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	,
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMÊNT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	

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

Pay: Payma Holding: Live. General Partner

SIGNATURE

4-22-02 (170) 565-8200 Dayle Dayline Phone #

CR2E003 (9/01)