Edgar Filing: KELLER DANIEL R - Form 4

| KELLER D Form 4 | DANIEL R | | | | | | | | | | | |
|--|--|---|---------------------------------------|---|-----------|------------------------|-----------|-------------|--|--|---|--|
| July 12, 200 | 05 | | | | | | | | | | | |
| FORM | ЛД | | | | | | | | | | PPROVAL | |
| | | RITIES shingto | | OMB Number: | 3235-0287 | | | | | | | |
| Check t if no lor subject Section Form 4 Form 5 obligati may con <i>See</i> Inst | nger to 16. or Filed pur ons ntinue. | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | |
| 1(b). (Print or Type | Responses) | | | | | | | | | | | |
| KELLER DANIEL R Sy | | | | | | d Ticker o 2 P [FUN | | ling | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (1 | Middle) | 3. Date of Earliest Transaction (Cheo | | | | | | k all applicable) | | | |
| (Mo | | | | Month/Day/Year))7/11/2005 | | | | | Director 10% Owner XOfficer (give title Other (specify below) below) below) Retired VP & GM - Cedar Point | | | |
| | | | | Amendment, Date Original d(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| SANDUS | KY, OH 44870-52 | 59 | | | | | | | | Nore than One Ro | | |
| (City) | (State) | (Zip) | Tab | le I - No | n-I | Derivative | Secu | rities Aco | quired, Disposed of | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | ecurity (Month/Day/Year) Execution Date, if | | | Code (Instr. 3, 4 and 5) (Instr. 8) (A) | | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4) | | |
| | | | | Code | v | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Units of Limited Partner Interest | 07/11/2005 | | | S | | 3,275 | | \$ 31.84 | 102,508 | D | | |
| Units of Limited Partner Interest | 07/12/2005 | | | S | | 7,525 | D | \$ 31.81 | 94,983 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not (9-02)

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required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or | | ate | 7. Title Amoun Under Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo |
|---|---|---|--|--|---------------------|--------------------|---|--|---|---|
| | | | | Disposed of (D) (Instr. 3, | | | | | | Trans (Instr |
| | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|-------------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| KELLER DANIEL R ONE CEDAR POINT DRIVE SANDUSKY, OH 44870-5259 | , | | Retired VP & GM - Cedar Point | | | | | |
| Signatures | | | | | | | | |
| Daniel R. Keller 07 | 7/12/2005 | | | | | | | |

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.