


**2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004**

**FILED
May 14, 2004 08:00 AM
Secretary of State**

DOCUMENT # A01000001161							
1. Entity Name JAHF PROPERTIES, LTD., LLLP							
Principal Place of Business 301 EAST PINE STREET, SUITE 1400 ORLANDO, FL 32801			Mailing Address P.O. BOX 3068 ORLANDO, FL 32802-3068				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt # etc			Suite, Apt # etc				
City & State			City & State				
Zip		Country	Zip		Country		
4. FEI Number 59-3742054				Applied For Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
PRICE, PAMELA O ESQ. 301 EAST PINE STREET, SUITE 1400 ORLANDO, FL 32801			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			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 _____ DATE _____ <small>Signature: Typed or printed name of registered agent and filer, applicable.</small>							
9. Capital Contributions as Shown on record \$5,000,000.00		10. Amount of Capital Contributions in FLORIDA to date \$7000 ⁰⁰		4-19-04			
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 #	P01000085654		STREET ADDRESS				
NAME	JAHF, INC.		CITY, ST, ZIP				
STREET ADDRESS	301 EAST PINE STREET, SUITE 1400						
CITY, ST, ZIP	ORLANDO, FL 32801						
DOCUMENT #			STREET ADDRESS	U00000160752			
NAME			CITY, ST, ZIP	05/18/04-80001-006 150.00			
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CITY, ST, ZIP							
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(ii) 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 this limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.							
SIGNATURE: <u>JAHF, INC.</u> <u>By [Signature] Vice President</u> 4-19-04							
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>							

STAPLE CHECK HERE