2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A01000001180

1. Entity Name
DIVERSIFIED BUILDING SYSTEMS LIMITED PARTNERSHIP

FILED
04 APR 30 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3325 ADDISON PENSACOLA, FL 32514	3325 ADDISON PENSACOLA, FL 32514

04242004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business	3. Mailing Address
5689 Industrial Blvd	5689 Industrial Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Milton, FL	City & State: Milton, FL
Zip: 32583 Country: USA	Zip: 32583 Country: USA

4. FEI Number 59-3742970 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVIS, BRAD 3325 ADDISON PENSACOLA, FL 32514	Name: same Street Address (P.O. Box Number is Not Acceptable): 5689 Industrial Blvd City: Milton FL Zip Code: 32583

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
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $1,000.00

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 form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P01000086315	STREET ADDRESS	5689 Industrial Blvd
NAME	STEEL BUILDING CONSULTANTS, INC.		
STREET ADDRESS	3325 ADDISON DRIVE		
CITY-ST-ZIP	PENSACOLA, FL 32514	CITY-ST-ZIP	Milton, FL 32583
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
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CITY-ST-ZIP		CITY-ST-ZIP	

STAPLE CHECK HERE

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] 4-24-04 850-477-1557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #