2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
04 APR -2 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A01000001495

1. Entity Name
BELLE HARBOR DEVELOPMENT, LTD.

Principal Place of Business	Mailing Address
2201 4TH STREET SUITE 200 ST. PETERSBURG, FL 33704	2201 4TH STREET SUITE 200 ST. PETERSBURG, FL 33704

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03162004 Chg-LP CR2E003 (10/03)

4. FEI Number 01-0634476 ☐ 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
CHEEZEM, J. MICHAEL 2201 4TH STREET SUITE 200 ST. PETERSBURG, FL 33704	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
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. S.A. Filed 4-2-04 4,809,500

10. Amount of Capital Contributions in FLORIDA to date. 4,809,500.00

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 #	P01000107959	STREET ADDRESS	
NAME	JMC COMMUNITIES OF CLEARWATER IV, INC.		
STREET ADDRESS	2201 4TH STREET SUITE 200	CITY-ST-ZIP	
CITY-ST-ZIP	ST. PETERSBURG, FL 33704		
DOCUMENT #		STREET ADDRESS	100031743301
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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: John P. Hobach 3-17-04 7278230022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #