2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
04 MAY 27 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A20913

1. Entity Name
THE CLOISTERS OF COUNTRYSIDE, LTD.

Principal Place of Business	Mailing Address
3711 CORTEZ ROAD, W., STE. 300 BRADENTON, FL 34210	3711 CORTEZ ROAD, W., STE. 300 BRADENTON, FL 34210

03232004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc. 8210 Lakewood Ranch Blvd.	Suite, Apt. #, etc. 8210 Lakewood Ranch Blvd.
City & State Bradenton, FL 34202	City & State Bradenton, FL 34202
Zip / Country	Zip / Country

4. FEI Number 59-2599051 ☐ 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
HEIM, PRISCILLA G 3711 CORTEZ ROAD, W., STE. 300 BRADENTON, FL 34210 8210 Lakewood Ranch Blvd. Bradenton, FL 34202	Name Street Address (P.O. Box Number is Not Acceptable) 8210 Lakewood Ranch Blvd. Bradenton, FL 34202 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.	$990.00	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 #	L02000012926	STREET ADDRESS	8210 Lakewood Ranch Blvd.
NAME	MART PROPERTIES LLC	CITY-ST-ZIP	Bradenton, FL 34202
STREET ADDRESS	3711 CORTEZ ROAD WEST		
CITY-ST-ZIP	BRADENTON, FL 34210		
DOCUMENT #		STREET ADDRESS	900037814179
NAME		CITY-ST-ZIP	06/09/04--01079--001 **68.75
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	900037814179
STREET ADDRESS			06/09/04--01079--002 **52.50
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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: Priscilla G Heim 3/23/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #