
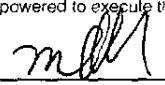


**2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004**

**FILED  
Apr 29, 2004 08:00 AM  
Secretary of State**

<b>DOCUMENT # A32813</b>							
1. Entity Name CPS PROPERTIES, LTD.							
Principal Place of Business 324 ROYAL PALM WAY STE. 231 PALM BEACH, FL 33480			Mailing Address P.O. BOX 2771 PALM BEACH, FL 33480				
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	02262004 Chg-LP CR2E003 (10/03)			
4. FEI Number 65-0386215			Applied For Not Applicable				
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
HAISFIELD, MARC 324 ROYAL PALM WAY, STE. 231 PALM BEACH, FL 33480			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 title if applicable.</small>							
9. Capital Contributions as Shown on record. \$0.00		10. Amount of Capital Contributions in FLORIDA to date					
<b>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.</b>							
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY				
DOCUMENT #	P92000008122		STREET ADDRESS				
NAME	BLUE CHIP REALTY, INC.		CITY - ST - ZIP				
STREET ADDRESS	324 ROYAL PALM WAY, STE. #231						
CITY - ST - ZIP	PALM BEACH, FL 33480						
DOCUMENT #			STREET ADDRESS				
NAME			CITY - ST - ZIP				
STREET ADDRESS							
CITY - ST - ZIP							
DOCUMENT #			STREET ADDRESS				
NAME			CITY - ST - ZIP				
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CITY - ST - ZIP							
1100000157221 05/06/04-80011-018 141.25							
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: 		Marc Haisfield Partner		4/24/04			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date		Daytime Phone #			

STAPLE CHECK HERE