


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A33083 1. Entity Name LE CIEL VENETIAN TOWER, LTD.	
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Principal Place of Business 4200 GULF SHORE BOULEVARD NORTH NAPLES, FL 34103	Mailing Address 4200 GULF SHORE BOULEVARD NORTH NAPLES, FL 34103
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



02172004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0341383	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CATALANO, ANTHONY J 4001 TAMiami TRAIL NORTH, #250 NAPLES, FL 33940	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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

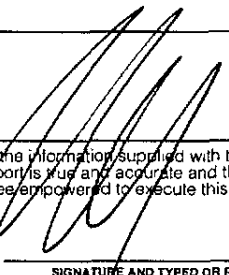
9. Capital Contributions as Shown on record. \$7,200,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	V45116	STREET ADDRESS	
NAME	LE CIEL VENETIAN TOWER, INC.	CITY - ST - ZIP	
STREET ADDRESS	4200 GULF SHORE BLVD. NO		
CITY - ST - ZIP	NAPLES, FL		
DOCUMENT #		STREET ADDRESS	000000157690
NAME		CITY - ST - ZIP	05/06/04-80037-010 526 25
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
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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:  **Howard B. Gutman**
 Vice President of General Partnership 4/27/04 (239) 261-6100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #