

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A93000001309	
1. Entity Name CSC PALM VILLAGE, LTD.	

Principal Place of Business C/O DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD SUITE 508 PALM BEACH GARDENS, FL 33410-2758	Mailing Address C/O DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD SUITE 508 PALM BEACH GARDENS, FL 33410-2758
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

	
03022004 Chg-LP	CR2E003 (10/03)
4. FEI Number 11-3192122	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BOULEVARD STE. 508 PALM BEACH GARDENS, FL 33410	
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7. Name and Address of New Registered Agent	
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 _____	
9. Capital Contributions as Shown on record \$330,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$330,000.00

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 #	P98000081678	STREET ADDRESS	
NAME	PARADISE CAY GENERAL PARTNER, INC.	CITY - ST - ZIP	
STREET ADDRESS	3801 PGA BOULEVARD STE. 508		
CITY - ST - ZIP	PALM BEACH GARDENS, FL 334102758		
DOCUMENT #		STREET ADDRESS	U000000159746
NAME		CITY - ST - ZIP	05/10/04-80043-023 535.00
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STREET ADDRESS			
CITY - ST - ZIP			

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.	
Paradise Cay General Partner, Inc.	
SIGNATURE: By: 	DATE: MAY 04/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	

STAPLE CHECK HERE